

Self-managed superannuation fund annual return

2025

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 2025* (NAT 71287).

- 1 The Self-managed superannuation fund annual return instructions 2025 (NAT 71606) (the instructions) can assist you to complete this annual return.
- The SMSF annual return cannot be used to notify us of a change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entities form (NAT 3036).

To complete this annual return

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

To assist processing, write the fund's TFN at the top of pages 3, 5, 7, 9 and 11.

S M I T H S T

- Place X in ALL applicable boxes.
- Postal address for annual returns:

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

Section A: Fund information

- 1 Tax file number (TFN)
 - 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 annual return. See the Privacy note in the Declaration.

2	N	lam	ne c	of s	elf-	-ma	ana	ıge	d s	up	era	nn	ua	tio	n fı	ınc	ı (S	MS	SF)												
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5 Annual return status

Is this an amendment to the SMSF's 2025 return?

A No Yes

Is this the first required return for a newly registered SMSF?

B No Yes



6 SM Auditor's	ISF a		or																										
Title: Mi		Mrs		Miss		M	s	Oth	er																				
Family nan	ne			,									JL	JL									,						
																	Ш												
First given	name		7	1					7			Other (given	name	S							7	7	1					
SMSF A	 uditor	Num] ber		Ш			 Audita	JL or's r	hor	ne ni	L L umbe	J∟ r	JLJL								JL							
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Was Par	t A of	the a	udit	repo	ort c	qua	lified	?			В	No		Yes															
Was Par	t B of	the a	udit	repo	ort c	qua	lified	?			C	No		Yes															
If Part B have the											D	No		Yes															
7 Ele	ctro	nic fi	ınd	e tr	and	efe	r (F	FT)																					
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We	need	your					•	•	's fin	anci	al in	stituti	on d	etails	to pa	ay ar	ny su	per	рау	mer	nts a	nd t	ax r	efur	nds	owi	ng to	o yo	u.
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Α	Fund Fund Fund I wo Fina This BSE	d's f acco d BSE d acc duld lik ancia acco	self- ina unt nunt nunt nunt in unt unt unt unt unt unt	man ncia is us t nan yy tax stitu	age II in ed: r [ne (ref	ed s nsti for func	super la	on a er cor	ntribu	ution	t de	etails nd rol Fi unt.	lovel und	rs. Do acco	not	prov	vide a	a tax	(ag								ng to	o yo	u.
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Α	Fund Fund Fund I wo Fina This BSE Acco	d's f acco d BSE d acci uld lik ancia acco s num bunt r	self- inal unt 3 nu ount e m il in unt ber nam	man ncia is us mbe t nan y tax stitu e	age	ed s nsti for func n for	uperituti supe	fund on a er cor aade t ount efund	ntribu	bunt ution [] [] [] [] [] [] [] [] [] [t de	etails nd rol Figure 1 unt. [or tax provide	lovel und	rs. Do acco	o not unt n	provumb	vide a	a tax	ag						nds		ng to	o yo	u.
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	Fund's tax file number (TFN)
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-contribution and Low Income Super Amounts? C No Yes
9	Was the fund wound up during the income year? No Yes 1 If yes, provide the date on which the fund was wound up 1 If yes, provide the date on which the fund was wound up 1 If yes would up 1 If
10	Exempt current pension income Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year?
	To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under the law. Record exempt current pension income at Label A.
	No Go to Section B: Income.
	Yes Exempt current pension income amount A\$,,,
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method B
	Unsegregated assets method C Was an actuarial certificate obtained? D Yes
	Did the fund have any other income that was assessable?
	E Yes Go to Section B: Income.
	No Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. Go to Section C: Deductions and non-deductible expenses. (Do not complete Section B: Income.)
	lf you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.



0 11 -	- D		
Section	n K: I	Income	•

Do not complete this section if all the retirement phase for the entire y notional gain. If you are entitled to cl	ear, there was no other incom	ne that was assessable, ar	nd you have not realis	sed a deferred
11 Income Did you have a capital gains (CGT) event during the years.		If the total capital loss or t \$10,000 or you elected to 2017 and the deferred no complete and attach a Ca	use the transitional C tional gain has been re	GT relief in ealised,
Have you applied exemption or rollow		Code		
	Net capital gain	A \$	<u></u> ,∞	
Gross rent and o	ther leasing and hiring income	B\$,	,	
	Gross interest	c \$,		
	Forestry managed investment scheme income	x \$,	,	
Gross foreign income D1 \$	•M Net foreign income	D \$	<u>,</u>	Loss
Australian franking credits t	rom a New Zealand company	E \$	<u> </u>	Number
	Transfers from foreign funds	F \$	<u> </u>	Number
	Gross payments where ABN not quoted	н \$		
Calculation of assessable contribution Assessable employer contribution	utions Gross distribution	1\$	· 	Loss
R1 \$,,	*Unfranked dividend	J \$		
plus Assessable personal contribution R2 \$	*Franked dividend	K \$	·_,	
plus **No-TFN-quoted contribution		LS		
R3 \$,,		M \$		Code
less Transfer of liability to life insurand company or PST	distributions Assessable			
R6 \$,	contributions (R1 plus R2 plus R3 less R6)	R \$	·×	
Calculation of non-arm's length in *Net non-arm's length private company of	dividende			Code
U1 \$,,	*Other income *Assessable income	S \$,	,∞	
plus *Net non-arm's length trust distrib	utions due to changed tax status of fund	T \$,	
plus *Net other non-arm's length inco	Not non owele			
U3 \$	(subject to 45% tax rate) (U1 plus U2 plus U3)	U \$,∞	
#This is a mandatory label.	GROSS INCOME (Sum of labels A to U)	w \$,	Loss
entered at this label,	empt current pension income	Y \$,	,	
check the instructions to ensure the correct tax treatment has been applied.	OTAL ASSESSABLE INCOME (W /ess Y)		, □ □ -∞	Loss

Section C: Ded	uctions and non-deductible	expenses
12 Deductions and n	on-deductible expenses	
expenses', list a	ns' list all expenses and allowances you are entitled I other expenses or normally allowable deductions the ted to exempt current pension income should be rec	nat you cannot claim as a deduction (for example,
	DEDUCTIONS	NON-DEDUCTIBLE EXPENSES
Interest expenses within Australia	A1 \$,,∞	A2 \$ ∞
Interest expenses overseas	B1 \$,,∞	B2 \$,,∞
Capital works expenditure	D1 \$,,	D2 \$,,×
Decline in value of depreciating assets	E1 \$	E2 \$
Insurance premiums – members	F1 \$,	F2 \$,,∞
SMSF auditor fee	H1 \$,∞	H2 \$,,
Investment expenses	I1 \$,,∞	I2 \$,,∞
Management and administration expenses	J1 \$,	J2 \$,,∞
Forestry managed investment scheme expense	U1 \$	U2 \$
Other amounts	L1 \$,	L2 \$ □ □ □ , □ □ □ ·∞ □
Tax losses deducted	M1 \$,	
	TOTAL DEDUCTIONS N \$,, (Total A1 to M1)	TOTAL NON-DEDUCTIBLE EXPENSES Y \$ (Total A2 to L2)
#This is a mandatory label.	*TAXABLE INCOME OR LOSS O \$,, (TOTAL ASSESSABLE INCOME /ess TOTAL DEDUCTIONS)	TOTAL SMSF EXPENSES Z \$ \(\bigcup_{\lorento} \pi_{\lorento} \bigcup_{\lorento} \bigcup_

Fund's tax file number (TFN)



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.

Please refer to the Self-managed superannuation fund annual return instructions 2025 on how to complete the calculation statement.	#Taxable income #Tax on taxable income #Tax on no-TFN-quoted contributions Gross tax	(an amount must be included even if it is zero) (an amount must be included even if it is zero) (an amount must be included even if it is zero) (an amount must be included even if it is zero)
Foreign income tax offset C1 \$		Non-refundable non-carry forward tax offsets C \$ (C1 plus C2)
Early stage venture capital partnership tax offset	limited	T2 \$,,, (B less C – cannot be less than zero)
Early stage venture capital tax offset carried forward f D2\$	rom previous year set	Non-refundable carry forward tax offsets D \$,
D4\$		T3 \$,,, (T2 less D – cannot be less than zero)
Complying fund's franking of the state of th		Refundable tax offsets E\$,
	#TAX PAYABLE	(T3 less E – cannot be less than zero)
		Section 102AAM interest charge G \$

	Fund's tax file number (TFN)	
withh H2\$ Cred or TF H3\$ Cred paym H5\$ Cred H6\$ Cred	t for tax withheld – foreign resident olding (excluding capital gains) I go you withheld – where ABN on the plus Habitan shall be p	712260925
	#Tax offset refunds (Remainder of refundable tax offsets) \$, , ,	
	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 plus L less M plus N)	
#This is a ma	andatory label.	
14 Losses	to later income years Ses is greater than \$100,000, e and attach a Losses Net capital losses carried to ward to later income years Net capital losses carried to ward to later income years V \$]\%(]\%(

Section F: Member information	
MEMBER 1	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name Other given names	
Day Month	Year
Member's TFN See the Privacy note in the Declaration. Date of birth Date of birth	Tear
Contributions OPENING ACCOUNT BALANCE \$,	
Proceeds from primary residence disposal Refer to instructions for completing these labels.	
Employer contributions H \$ Day Month Year	
A \$,	
ABN of principal employer Assessable foreign superannuation fund amount	
A1	ount
B\$ J\$ D D D D D D D D D	Julit
CGT small business retirement exemption Transfer from reserve: assessable amount	
C \$, K \$,	
CGT small business 15-year exemption amount Transfer from reserve: non-assessable amount L \$ D D D D D D D D D	
Personal injury election Contributions from non-complying funds	
E \$ and previously non-complying funds	
Spouse and child contributions T \$,	
F \$,,, Any other contributions Other third party contributions Any other contributions (including Super Co-contributions and Low Income Super Amounts)	
G \$	
TOTAL CONTRIBUTIONS N \$,,,	
Allocated earnings or losses Los	SS
Other transactions • \$	
Accumulation phase account balance	
Retirement phase account balance Non CDRIS	
- Non CDBIS S2 \$ Lump Sum payments Coo	de
Retirement phase account balance	
- CDBIS Income stream payments Co	de
S3 \$	
TRIS Count CLOSING ACCOUNT BALANCE \$ \$	
(S1 plus S2 plus S3)	
Accumulation phase value X1 \$	
Retirement phase value X2 \$	
Outstanding limited recourse	

Fund's tax file number (TFN)	
MEMBER 2	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name Other given names	
Member's TFN	Month Year
See the Privacy note in the Declaration. Date of birth	
Contributions OPENING ACCOUNT BALANCE \$,	
Proceeds from primary residence dispo	sal
Process in the second structions for completing these labels.	
Employer contributions A \$	Year
ABN of principal employer Assessable foreign superannuation fund	amount
A1	
Personal contributions Non-assessable foreign superannuation	fund amount
B \$	
CGT small business retirement exemption C \$	ınt
CGT small business 15-year exemption amount Transfer from reserve: non-assessable a	amount
D\$ L\$ D D D D D D D D D D D D D D D D D	
Personal injury election Contributions from non-complying fund	
E \$ and previously non-complying funds Space and child contributions T \$ T	226
Spouse and child contributions F \$ Any other contributions Any other contributions	1025
(including Super Co-contributions Other third party contributions Other third party contributions	
G \$, M \$,	
TOTAL CONTRIBUTIONS N \$,,, (Sum of labels A to M)	
Allocated earnings or losses	Loop
Other transactions • \$ \tag{\text{Other transactions}}	Loss
Inward rollovers and transfers	
Accumulation phase account balance S1 \$ P \$, , , , , , , , , , , , , , , , ,	
Outward rollovers and transfers	
- Non CDBİS	
S2 \$ Lump Sum payments R1 \$ D D D D D D D D D D D D D D D D D D	Code
Retirement phase account balance	
S3 \$ R2 \$ R	Code
TRIS Count CLOSING ACCOUNT BALANCE S\$,	
(S1 plus S2 plus S3)	
Accumulation phase value X1 \$,	
Retirement phase value X2 \$	

1	
MEMBER 3	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name Other given	names
	Day Month Year
Member's TFN See the Privacy note in the Declaration.	Date of birth / / / / / / / / / / / / / / / / / / /
Contributions OPENING ACCOUNT BALANCE \$	
Pefer to instructions for completing these labels.	Proceeds from primary residence disposal
Employer contributions	Day Month Year
А\$ Н	1 Receipt date / / / / / / / / / / / / / / / / / / /
ABN of principal employer	Assessable foreign superannuation fund amount
	\$,
Personal contributions B \$	Non-assessable foreign superannuation fund amount
CGT small business retirement exemption	
C \$	Transfer from reserve: assessable amount
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
	\$
Personal injury election	Contributions from non-complying funds
E \$	and previously non-complying funds
Spouse and child contributions	Any other contributions
F \$,,	(including Super Co-contributions
Other third party contributions G \$ M	ànd Low Income Super Amounts) \$
	Ψ
TOTAL CONTRIBUTIONS N	\$
	(Sum of labels A to M)
Other transactions	Allocated earnings or losses
Other transactions O	
Accumulation phase account balance	Inward rollovers and transfers
S1 \$ P	
Retirement phase account balance	Outward rollovers and transfers
- NOU CDRIS	
S2 \$	
Retirement phase account balance – CDBIS	
S3 \$ R2	
	Ψ
TRIS Count CLOSING ACCOUNT BALANCE S	\$
	(S1 plus S2 plus S3)
Accumulation phase value X1	\$
Retirement phase value X2	* ,
Outstanding limited recourse borrowing arrangement amount	\$,

Fund's tax file number (TFN)	
MEMBER 4	
Title: Mr Mrs Miss Ms Other	
Family name	
First given names Other given names	
Day	Month Year
Member's TFN See the Privacy note in the Declaration. Date of birth	
Contributions OPENING ACCOUNT BALANCE \$,	
Refer to instructions for completing these labels. Proceeds from primary residence dispose to the	sal
Employer contributions H \$	Year
A \$,	
ABN of principal employer Assessable foreign superannuation fund	amount
A1 Personal contributions Non-assessable foreign superannuation	fund amount
B\$	
CGT small business retirement exemption Transfer from reserve: assessable amou	nt
C \$,, K \$,, CGT small business 15-year exemption amount K \$,, Transfer from reserve: non-assessable a	mount
D\$	THOUR
Personal injury election Contributions from non-complying funds and previously non-complying funds	
Spouse and child contributions and previously non-complying funds T \$	2261
F \$, Any other contributions (including Super Co-contributions	125
Other third party contributions and Low Income Super Amounts)	_
G \$ M \$	
TOTAL CONTRIBUTIONS N \$,,	
(Sum of labels A to M)	—
Allocated earnings or losses Other transactions Allocated earnings or losses	Loss
Inward rollovers and transfers	
Accumulation phase account balance S1 \$ P \$, , , , , , , , , , , , , , , , ,	
Retirement phase account balance Non CDRIS Outward rollovers and transfers Q \$	
	Code
S2 \$, Retirement phase account balance	
- CDBIS Income stream payments	Code
S3 \$, R2 \$,	
TRIS Count CLOSING ACCOUNT BALANCE \$ \$	
(S1 plus S2 plus S3)	
Accumulation phase value X1 \$	
Retirement phase value X2 \$	
السا لسالسا ولسالسا ولسالسا ولسالسالها في السالسالية السالية السالسالية السال	

1	
MEMBER 5	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name Other give	
Member's TFN	Date of birth Day Month Year
See the Privacy note in the Declaration.	
Contributions OPENING ACCOUNT BALANCE \$	_,,
	Proceeds from primary residence disposal
Refer to instructions for completing these labels.	
Employer contributions	Day Month Year
,,	11 Receipt date / / / / / / / / / / / / / / / / / / /
ABN of principal employer	Assessable foreign superannuation fund amount
	\$ _ _ _ , _
Personal contributions B \$	Non-assessable foreign superannuation fund amount
CGT small business retirement exemption	
	Transfer from reserve: assessable amount
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
	. \$
Personal injury election	Contributions from non-complying funds
E \$	and previously non-complying funds
Spouse and child contributions	·\$
F \$	Any other contributions (including Super Co-contributions
Other third party contributions	and Low Income Super Amounts)
G \$ M	\$ _ _ _ , _
TOTAL CONTRIBUTIONS N	
TOTAL CONTRIBUTIONS	(Sum of labels A to M)
	Allo acted compines or leaded
Other transactions	S Coss Coss
	Inward rollovers and transfers
Accumulation phase account balance	
S1 \$	Outward rollovers and transfers
Retirement phase account balance - Non CDBIS	
S2 \$	Lump Sum payments Code
Retirement phase account balance - CDBIS	Income stream payments Code
S3 \$ R2	
TRIS Count CLOSING ACCOUNT BALANCE S	
	(S1 plus S2 plus S3)
Accumulation phase value X1	\$
Retirement phase value X2	
Outstanding limited recourse borrowing arrangement amount	'\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

MEMBER 6	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name Other give	en names
Member's TFN See the Privacy note in the Declaration.	Date of birth Day Month Year
Contributions OPENING ACCOUNT BALANCE \$	
Refer to instructions for completing these labels.	Proceeds from primary residence disposal
Employer contributions	Day Month Year
A\$,,, ABN of principal employer	H1 Receipt date // // // // // // // // // // // // //
	Assessable foreign superannuation fund amount
Personal contributions	Non-assessable foreign superannuation fund amount
	J \$, ,
CGT small business retirement exemption C \$	Transfer from reserve: assessable amount
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
	_\$,,
Personal injury election E \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Contributions from non-complying funds and previously non-complying funds
	r \$,,
F \$,	Any other contributions (including Super Co-contributions
Other third party contributions G \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	and Low Income Super Amounts)
TOTAL CONTRIBUTIONS N	(Sum of labels A to M)
Other transactions	Allocated earnings or losses Loss
	Inward rollovers and transfers
Accumulation phase account balance	> \$
	Outward rollovers and transfers
– Non CDBIS	Lump Sum payments Code
S2 \$,	Lump Sum payments Code
Retirement phase account balance - CDBIS	Income stream payments Code
S3 \$ R2	2 \$,
TRIS Count CLOSING ACCOUNT BALANCE	\$ \$,, (S1 plus S2 plus S3)
Accumulation phase value X1	
Retirement phase value X2	
Outstanding limited recourse	
borrowing arrangement amount	' '

	Section G: Supplementary mer	nber information
	BER 7	Code
Title: Family n	Mr Mrs Miss Ms Other	Account status
First give	ven name Other gi	ven names
	Date of birth	If decased, date of death
See the	e Privacy note in the Declaration. Day Month	Year Day Month Year /
Contr	OPENING ACCOUNT BALANCE	\$
0 F	Refer to instructions for completing these labels.	Proceeds from primary residence disposal H \$
_	Employer contributions	Day Month Year
A	\$,, ABN of principal employer	H1 Receipt date / / / / / / / / / / / / / / / / / / /
A		Assessable foreign superannuation fund amount
_	Personal contributions	Non-assessable foreign superannuation fund amount
В	\$,, CGT small business retirement exemption	J \$ _ _ _ _ _ _
C	\$	Transfer from reserve: assessable amount K \$
	CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
D	Personal injury election	L \$, ,
E	\$	Contributions from non-complying funds and previously non-complying funds
	Spouse and child contributions	T \$
F	Other third party contributions	Any other contributions (including Super Co-contributions and Low Income Super Amounts)
G		M \$
	TOTAL CONTRIBUTIONS	S N \$ (Sum of labels A to M)
Other	r transactions	Allocated earnings or losses
Other	Hansachons	O \$,,, lnward rollovers and transfers
	Accumulation phase account balance	P \$
S1	Retirement phase account balance	Outward rollovers and transfers
	– Non CDBİS	Q \$,
S2		Lump Sum payments R1 \$ Code
	Retirement phase account balance – CDBIS	Income stream payments Code
S 3	\$,	R2 \$
	TRIS Count CLOSING ACCOUNT BALANCE	S \$
	Accumulation phase value	X1 \$
	Retirement phase value	• X2 \$
	Outstanding limited recourse	

Page 14 **OFFICIAL: Sensitive** (when completed)

MEMBER 8 Title: Mr Mrs Miss Ms Other Family name	Account status	Code
First given name Other given Member's TFN See the Privacy note in the Declaration. Date of birth Day Month	names If deceased, date of d Year Day Month	eath Year
Contributions OPENING ACCOUNT BALANCE \$	_,,,	
Refer to instructions for completing these labels.	Proceeds from primary residence disposal	
Employer contributions A \$,, ABN of principal employer A1 Personal contributions B \$	H1 Receipt date / / / / / / / / / / / / / / / / / / /	
CGT small business retirement exemption C\$	Transfer from reserve: assessable amount K \$:
Spouse and child contributions F\$,, Other third party contributions G\$,,	and previously non-complying funds T \$	unts)
TOTAL CONTRIBUTIONS	N \$ (Sum of labels A to M)	
Other transactions Accumulation phase account balance	Allocated earnings or losses S	Loss
S1 \$,, Retirement phase account balance - Non CDBIS	Outward rollovers and transfers Q \$,	
Retirement phase account balance - CDBIS	Lump Sum payments Income stream payments 12 \$	Code
TRIS Count CLOSING ACCOUNT BALANCE	S \$,	
Accumulation phase value	(1 \$,,	
Retirement phase value		
Outstanding limited recourse borrowing arrangement amount	Y \$	

1	
MEMBER 9	Code
Title: Mr Mrs Miss Ms Other Family name	Account status
First given name Other give	n names
Member's TFN See the Privacy note in the Declaration. Date of birth Day Month	If deceased, date of death Year Day Month Year
Contributions OPENING ACCOUNT BALANCE	\$_,,
Refer to instructions for completing these labels.	Proceeds from primary residence disposal H \$
Employer contributions A \$	Day Month Year H1 Receipt date / / / / / / / / / / / / / / / / / / /
ABN of principal employer	Assessable foreign superannuation fund amount
Personal contributions	I \$
B \$,	Non-assessable foreign superannuation fund amount
CGT small business retirement exemption C \$	Transfer from reserve: assessable amount
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
D \$,, Personal injury election	L \$
E \$,	Contributions from non-complying funds and previously non-complying funds
Spouse and child contributions F \$	Any other contributions (including Super
Other third party contributions	Co-contributions and Low Income Super Amounts) M \$
G \$	
TOTAL CONTRIBUTIONS	N \$ Sum of labels A to M)
Other transactions	Allocated earnings or losses O \$ Loss
	O \$,, Inward rollovers and transfers
Accumulation phase account balance \$1 \$	P \$,
Retirement phase account balance	Outward rollovers and transfers Q \$
- Non CDBIS S2 \$	Lump Sum payments Code
Retirement phase account balance - CDBIS	R1 \$
	Income stream payments R2 \$ Code
TRIS Count CLOSING ACCOUNT BALANCE	s \$,
	(SÍ plus S2 plus S3)
Accumulation phase value	X1 \$
Retirement phase value	X2 \$
Outstanding limited recourse borrowing arrangement amount	Y \$

MEMBER 10 Title: Mr Mrs Miss Ms Other	Account status Code
Family name	
First given name Other given name Member's TFN Date of birth See the Privacy note in the Declaration. Day Month	If deceased, date of death Year Day Month Year
Contributions OPENING ACCOUNT BALANCE \$.,,
Refer to instructions for completing these labels.	Proceeds from primary residence disposal H \$
Employer contributions A \$	H1 Receipt date / / / / / / / / / / / / / / / / / / /
TOTAL CONTRIBUTIONS	N \$,
Other transactions	(Sum of labels A to M) Allocated earnings or losses O \$ \qq \qua
S1 \$,	Inward rollovers and transfers P\$,,
S2 \$,, Retirement phase account balance _ CDBIS	Lump Sum payments Code Income stream payments Code Code
	s \$, ,
	(S1 plus S2 plus S3)
Accumulation phase value X	
Retirement phase value X Outstanding limited recourse borrowing arrangement amount	Y \$,

MEMBER 11 Title: Mr Mrs Miss Ms Other Family name	Account status Code
First given name Other give Member's TFN See the Privacy note in the Declaration. Date of birth Day Month	en names If deceased, date of death Year Year /
Contributions OPENING ACCOUNT BALANCE	\$_,,
Employer contributions A \$	Proceeds from primary residence disposal H\$
TOTAL CONTRIBUTIONS	N \$
Retirement phase account balance - CDBIS	Allocated earnings or losses O \$,
TRIS Count CLOSING ACCOUNT BALANCE	S \$
Accumulation phase value Retirement phase value	X2 \$
Outstanding limited recourse borrowing arrangement amount	Y\$

MEMBER 12 Title: Mr Mrs Miss Ms Other Family name	Account status Code
First given name Other given Member's TFN See the Privacy note in the Declaration. Day Month Day / / / / / / / / / / / / / / / / / / /	If deceased, date of death Year Day Month Year
Contributions OPENING ACCOUNT BALANCE \$	
Refer to instructions for completing these labels.	Proceeds from primary residence disposal H \$
Employer contributions A \$	H1 Receipt date / / / / / / / / / / / / / / / / / / /
TOTAL CONTRIBUTIONS	N \$
Accumulation phase account balance	Allocated earnings or losses Solution Loss Los
S1 \$,,	Outward rollovers and transfers Q \$
S2 \$,,	Lump Sum payments Code Income stream payments Code
S3 \$,	2 \$
TRIS Count CLOSING ACCOUNT BALANCE	\$ \$,,
Accumulation phase value X	(1 \$
Retirement phase value X	2 \$
Outstanding limited recourse borrowing arrangement amount	Y \$,

Section H: Assets and liab 15 ASSETS	ilities	
15a Australian managed investments	Listed trusts	s A \$
	Unlisted trusts	s B \$□□□,□□□,□□□•∞
	Insurance policy	<i>c</i> \$
Othe	r managed investments	s D \$ □ □ , □ □ ·∞
15b Australian direct investments	Cash and term deposits	s E \$□□□,□□□,□□□•∞
Limited recourse borrowing arrangements Australian residential real property	Debt securities	s F \$□□□,□□□.∞
J1 \$	Loans	s G \$ □ □ □ , □ □ □ •×
Australian non-residential real property	Listed shares	s H \$ □ □ □ , □ □ □ •∞
J2 \$,, Overseas real property	Unlisted shares	s \$
J3 \$, , b	Limited recourse orrowing arrangements	
J4 \$ □ □ □ , □ □ □ ·∞	Non-residential real property	
Overseas shares J5 \$	Residential real property	
Other Common Com	Collectables and personal use assets	I AM COOL OF THE SECOND
J6 \$ Property count	Other assets	
J7		
15c Other investments	Crypto-assets	s N \$,,∞
15d Overseas direct investments	Overseas shares	s P \$□□□,□□□,□□□•∞
Overseas non-	residential real property	Q \$,
Overseas	residential real property	R \$ □ □ □ , □ □ □ •×
Overseas	s managed investments	s \$ \$
	Other overseas assets	s T \$□□□,□□□,□□□•∞
TOTAL AUSTRALIAN AND (Sum of labels		U \$□□□,□□□.∞
15e In-house assets Did the fund have a loan to, lease to or investment in, related parties (known as in-house assets) at the end of the income year?	A No Yes	\$

5f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA	
	borrowings from a licensed A No Yes financial institution?	
	Did the members or related parties of the fund use personal guarantees or other security for the LRBA? No Yes	
16	LIABILITIES	
	Borrowings for limited recourse borrowing arrangements	
	V1 \$	
	Permissible temporary borrowings	
	V2 \$	
	Other borrowings V3 \$ Borrowings V \$ S S S S S S S S S S S S S S S S S S	
	Total member closing account balances (total of all CLOSING ACCOUNT BALANCEs from Sections F and G)	
	Reserve accounts X \$,	
	Other liabilities Y \$,	
	TOTAL LIABILITIES Z \$	
	Ction I: Taxation of financial arrangements Taxation of financial arrangements (TOFA)	
	Total TOFA gains H \$	
	Total TOFA losses \$	
	ction J: Other information	
	ily trust election status f 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 2024–25 income year, write 2025).	
	If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the <i>Family trust election</i> , revocation or variation 2025.	l
nte	posed entity election status	
	If the trust or fund has an existing election, write the earliest income year specified. If the trust or fund is making one or more elections this year, write the earliest income year being specified and complete an <i>Interposed entity election or revocation 2025</i> for each election.	
	If revoking an interposed entity election, print R , and complete and attach the <i>Interposed entity election or revocation 2025</i> .	

Section K: 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 annual 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 annual return, place all the facts before the ATO.

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

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

TRUSTEE'S OR DIRECTOR'S DECLARATION:

I declare that, the current trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received a copy of the audit report and am aware of any matters raised therein. The information on this annual return, including any attached schedules and additional documentation is true and correct.

Authorised trustee's, director's or public officer's signature
Day Month Year
Preferred trustee or director contact details:
Title: Mr Mrs Miss Ms Other Ms
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
1 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 <i>Self-managed superannuation fund annual return 2025</i> 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
Day Month Year Date / / / / / / / / / / / / / / / / / / /
Tax agent's contact details
Title: Mr Mrs Miss Ms Other Other
Family name
First given name Other given names
Tax agent's practice
Tax agent's phone number Reference number Tax agent number Tax agent number