

Ancillary fund return 2022

Specify period if part year or approved substitute period

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

lodging of your return.

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 2022</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* 2011 as amended in February 2022 for public ancillary funds and the *Private ancillary fund guidelines* 2019 as amended in March 2022 for private ancillary funds.

1 This form should be used for the 2022 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.

ess number (Al	BN) of fund			
our details on the	poses of the A New e Australian Business urther information.			
ces				
			State/territory	Postcode
				State/territory

Trustee details

	the trustee is a constitutional corporation show the trustee is a constitutional corporation show	v details here	
	ustralian Company Number, association umber or incorporation number		
Ta	ax file number (TFN)		
	We are authorised by the <i>Taxation Administration Act 18</i> lodging the return in the instructions for further informations.		the privacy note at Completing and
D	aytime contact phone number		
If	the trustee is an individual show details here		
	tle: Mr Mrs Miss Ms Other		
_ Fir	rst given name (Other given name/s	
		o ano. Given mame, o	
TF	FN DD DD		
	We are authorised by the <i>Taxation Administration Act 19</i> lodging the return in the instructions for further informations.		the privacy note at Completing and
D	aytime contact phone number		
Sec	tion B: Donations received		
D	onations received		
С	ash received	A \$	·×
Vá	alue of shares in publicly listed entities received	B \$	·%<
Vá	alue of shares in unlisted entities received	C \$	·%
	combined value of collectibles, land, buildings and other roperty received	D \$	·×
To	otal value of donations received (total of labels A to D)	E \$	·‰

Income			
Do not include donations received at this question. Do	natio	ns received	should be reported at question 7
Gross income (includes interest, dividends, franking credits, rent and other leasing and hiring income, distributions from a trust, and other gross income)	A	\$	·%<
Net gain on the disposal of assets	В	\$	·×
Total income (label A plus label B)	С	\$	·%(
Expenses			
	tribu	ions made s	should be reported at question 11
Salary	D	\$	·×
	Е	\$	·×
Total expenses (label D plus label E)	_	•	
Total expenses (label D plus label L)	F	\$	-%
Net income	ŀ	\$	∞
	Gross income (includes interest, dividends, franking credits, rent and other leasing and hiring income, distributions from a trust, and other gross income) Net gain on the disposal of assets Total income (label A plus label B) Expenses Do not include distributions made at this question. Dispension of the plus label by the plus lab	Gross income (includes interest, dividends, franking credits, rent and other leasing and hiring income, distributions from a trust, and other gross income) Net gain on the disposal of assets B Total income (label A plus label B) Expenses Do not include distributions made at this question. Distribut Salary Other expenses (includes rent, management, administration,	rent and other leasing and hiring income, distributions from a trust, and other gross income) Net gain on the disposal of assets Total income (label A plus label B) Expenses Do not include distributions made at this question. Distributions made so Salary Other expenses (includes rent, management, administration,

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 (tota	ıl of all C	Cand Dar	nounts)	⊨ ;
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\$	-300

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

financial year 12 Assets

	Cash and term deposits	A	\$	·×
	Listed shares	В	\$	·×
	Unlisted shares and managed funds	С	\$	·%
	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	\$	·×
13	Liabilities			
	Borrowings	G	\$	·×
	Other liabilities	Н	\$	·×
	Total liabilities at the end of the financial year (label G plus label H)	I	\$	·×
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? 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

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 declaration stating that the information provided to me is true and correct, and that the trustee has authorised me to lo	
Contact name	
Tax agent's phone number (include area code) Tax agent's reference number	
Client's reference	
Client's reference	

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