



ACTUARIAL CERTIFICATE DATAFORM

(For Unsegregated Assets as required by s295-390 of ITAA1997)

Upon completion please email to Brian@NetActuary.com.au

If you need help please call Brian on 03-6224 1145

If the SMSF has one or more legacy defined pensions, please use the application form for those type of entitlements and not this form.

FUND ADMINISTRATOR DETAILS:

Contact Name:				Your Ref (if Required):	
Company Name:				ABN:	
Postal Address: Street/POBox:					
City/Suburb:		State:		Post Code:	
Email Address:				Phone No:	
Second Email Address (Optional):				Invoice Entity:	

FUND DETAILS:

Name of Superannuation Fund:			Fund ABN:	
Name of Corporate Trustee (If relevant):			Company ABN:	
Certificate for Financial Year:		If Fund commenced in current year - Date of commencement:		
Number of Members:		If Fund wound up in current year - Date Ceased:		

IDENTIFICATION OF LESS USUAL CIRCUMSTANCES (Please tick all relevant boxes):

- Deemed or Elected Segregation
 Fund commenced or wound up in year
 Fund has Non-arms length Assets
 Disregarded Small Fund Assets
 Fund has Reserve Account
 A member died or insurance proceeds received in year

MEMBER DETAILS:

	Member 1	Member 2	Member 3	Member 4
Member/Trustee Firstname/s:				
Member/Trustee Surname:				
Member/Trustee Date of Birth:				
Date Joined if in current year:				
Date of Exit if in current year:				

It is proposed that in the future the maximum number of members a self managed fund is permitted to have may be increased from four to six members.

OPENING BALANCES:

	Member 1	Member 2	Member 3	Member 4	Totals
Opening Accumulation Balance:					
Opening Non-Retirement Phase Pensions:					
Opening Retirement Phase Pensions:					
Totals:					

A Transition to Retirement Pension can be either a Retirement or Non-Retirement Phase Pension.

ABP Pension Commutations:	Member:						
	Amount:						
	Date:						
	Member:						
	Amount:						
	Date:						
TRIS Ret-Phase Pension Payments:	Member:						
	Amount:						
	Date:						
	Member:						
	Amount:						
	Date:						
	Member:						
	Amount:						
	Date:						

INTERNAL TRANSFERS IN FINANCIAL YEAR:

	Transfer 1:	Transfer 2:	Transfer 3:	Transfer 4:	Transfer 5:	Transfer 6:	Transfer 7:
Date:							
From Account:							
To Account:							
Amount:							

COMMENTS:

Please email the completed data form to Brian@NetActuary.com.au For any assistance required please phone 03-9028 5002