# Self-managed superannuation fund annual return 2019

<ul> <li>Who should complete this annual return?</li> <li>Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the Fund income tax return 2019 (NAT 71287).</li> <li>The Self-managed superannuation fund annual return instructions 2019 (NAT 71606) (the instructions) can assist you to complete this annual return.</li> <li>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).</li> </ul>			To complete this annual return  ■ Print clearly, using a BLACK pen only.  ■ Use BLOCK LETTERS and print one character per box.  ③ M / T # ⑤ T					
Se	ection A: Fund information			Δ-				
1	Tax file number (TFN)				ocessing, write the bages 3, 5, 7 and 9			
	The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual retu	e not o ırn. Se	bliged e the F	to quote your Ti Privacy note in th	FN but not quoting ne Declaration.	it could increase		
2	Name of self-managed superannuation fund (SMSF	·)						
3	Australian business number (ABN) (if applicable)							
4	Current postal address							
Sub	ourb/town				State/territory	Postcode		
5	Annual return status Is this an amendment to the SMSF's 2019 return?	A	No	Yes				
	Is this the first required return for a newly registered SMSF?	В	No	Yes				

#### 6 SMSF auditor

Auditor's name

Title: Mr Mrs Miss Ms Other

Family name

First given name Other given names

SMSF Auditor Number Auditor's phone number

Postal address

Suburb/town State/territory Postcode

Date audit was completed A Month Year

Was Part A of the audit report qualified?

B No
Yes

Was Part B of the audit report qualified? C No Yes

If the audit report was qualified, have the reported issues been rectified?

### 7 Electronic funds transfer (EFT)

We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.

#### A Fund's financial institution account details

This account is used for super contributions and rollovers. Do not provide a tax agent account here.

Fund BSB number Fund account number

Fund account name

I would like my tax refunds made to this account. Go to C.

#### B Financial institution account details for tax refunds

This account is used for tax refunds. You can provide a tax agent account here.

BSB number Account number

Account name

#### C Electronic service address alias

Provide the electronic service address alias (ESA) issued by your SMSF messaging provider. (For example, SMSFdataESAAlias). See instructions for more information.

Status of SMSF Australian superannuation fund A No Yes Fund benefit structure Code Does the fund trust deed allow acceptance of C No Yes the Government's Super Co-contribution and Low Income Super Amounts? Was the fund wound up during the income year? Have all tax lodgment Month and payment obligations been met? If yes, provide the date on Yes which the fund was wound up 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. Exempt current pension income amount A\$ Yes 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. 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.) No If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.

# Section B: Income

**Do not complete this section** if all superannuation interests in the SMSF were supporting superannuation income streams in the retirement phase for the **entire year**, there was **no** other income that was assessable, and you **have not** realised a deferred notional gain. If you are entitled to claim any tax offsets, you can record these at Section D: Income tax calculation statement.

riotional gain in jourano oritin	nous to oranii anii	ian onooio, you o	arricoord tricoc at Cootlori B. Iricon	io table dandardarioni diatorinonia
11 Income Did you have a capi (CGT) event durir		i No Yes	If the total capital loss or total capital \$10,000 or you elected to use to 2017 and the deferred notional complete and attach a Capital (	the transitional CGT relief in gain has been realised,
	u applied an n or rollover?	No Yes	Code	
		Net capital	gain <b>A</b> \$	
Gross rer	nt and other leasi	ing and hiring inc	ome <b>B</b> \$	
		Gross inte	rest C\$	
	Forestry	managed investr scheme inc		
Gross foreign inc	come			Loss
D1 \$		Net foreign inc	ome <b>D</b> \$	
Australian franking	credits from a Ne	ew Zealand com	pany <b>E</b> \$	
		Transfers foreign fu		Number
,	Gr	ross payments w ABN not qu		
Calculation of assessable Assessable employer co		Gross distribution		Loss
R1 \$		*Unfranked divid	end bunt <b>J \$</b>	
plus Assessable personal co	ontributions	*Franked divid		
plus #*No-TFN-quoted cor	ntributions	*Dividend fran		
R3 \$ (an amount must be include	,	*Gross distribut	rust M ¢	Code
less Transfer of liability to life company or PS		Assess contribut (R1 plu plus R3 les	able ons s R \$	
Calculation of non-arm's ke *Net non-arm's length private co	•	*Other inc	ome <b>\$</b> \$	Code
plus*Net non-arm's length trus	st distributions	*Assessable inc due to changed status of	tax <b>T \$</b>	
plus *Net other non-arm's ler	0	Net non-a length inc (subject to 45% tax (U1 plus U2 plus	ome II d	
#This is a mandatory label.		GROSS INCO		Loss
*If an amount is entered at this label,	Exempt cu	rrent pension inc	ome <b>Y</b> \$	
check the instructions to ensure the correct tax treatment has been applied.		SSESSABLE ME (W less Y)	\$	Loss

Page 4

# Section C: Deductions and non-deductible expenses

TOTAL DEDUCTIONS

label.

### 12 Deductions and non-deductible expenses

Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded in the 'Non-deductible expenses' column).

	DEDUCTIONS	NON-DEDUCTIBLE EXPENSES
Interest expenses within Australia	A1 \$	A2 \$
Interest expenses overseas	B1 \$	<b>B2</b> \$
Capital works expenditure	D1 \$	D2 \$
Decline in value of depreciating assets	E1 \$	<b>E2</b> \$
Insurance premiums – members	F1 \$	F2 \$
Death benefit increase	G1 \$	
SMSF auditor fee	H1 \$	H2 \$
Investment expenses	I1 \$	12 \$
Management and administration expenses	J1 \$	<b>J2</b> \$
Forestry managed investment scheme expense	U1 \$	U2 \$
Other amounts	L1\$	L2 \$
Tax losses deducted	M1 \$	
	TOTAL DEDUCTIONS	TOTAL NON-DEDUCTIBLE EXPENSES
	N\$	Y\$
	(Total A1 to M1)	(Total <b>A2</b> to <b>L2</b> )
	*TAXABLE INCOME OR LOSS	Loss TOTAL SMSF EXPENSES
	<b>o</b> \$	Z\$
#This is a mandatory	(TOTAL ASSESSABLE INCOME less	(N plus Y)

# 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.

#### 13 Calculation statement

Please refer to the Self-managed superannuation fund annual return instructions 2019 on how to complete the calculation statement.

#Taxable income A\$

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

#Tax on taxable income

#Tax on t

Gross tax **B** \$

(T1 plus J)

Foreign income tax offset

C1 \$

Rebates and tax offsets

Non-refundable non-carry forward tax offsets

C2 \$

(C1 plus C2)

SUBTOTAL 1

T2 \$

(B less C - cannot be less than zero)

Early stage venture capital limited partnership tax offset

**D1**\$

Early stage venture capital limited partnership tax offset carried forward from previous year

**D2**\$

Early stage investor tax offset

**D3**\$

Early stage investor tax offset carried forward from previous year

**D4**\$

Non-refundable carry forward tax offsets

**D**\$

(D1 plus D2 plus D3 plus D4)

SUBTOTAL 2

T3 \$

(T2 less D - cannot be less than zero)

Complying fund's franking credits tax offset

E1\$

No-TFN tax offset

**E2**\$

National rental affordability scheme tax offset

**E3**\$

Exploration credit tax offset Refundable tax offsets

**E4**\$

E\$

(E1 plus E2 plus E3 plus E4)

\*TAX PAYABLE **T5** \$

(T3 less E – cannot be less than zero)

Section 102AAM interest charge

**G**\$

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**\$

Eligible credits

**H**\$

1\$

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

\*Tax offset refunds

(Remainder of refundable tax offsets)

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

PAYG instalments raised

**K**\$

Supervisory levy

Supervisory levy adjustment for wound up funds

**M**\$

Supervisory levy adjustment for new funds

**N**\$

AMOUNT DUE OR REFUNDABLE

**S**\$

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

(T5 plus G less H less I less K plus L less M plus N)

\*This is a mandatory label.

# Section E: Losses

## 14 Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2019.

Tax losses carried forward to later income years

Net capital losses carried forward to later income years

Section F: Member informati	ion					
MEMBER 1						
Title: Mr Mrs Miss Ms Other						
Family name						
First given name	Other given r	names				
Member's TFN See the Privacy note in the Declaration.			Day Month Year  Date of birth			
Contributions OPENING ACCOU	JNT BALANCE	\$				
Refer to instructions for completing these lab	els.	Proceeds <b>H</b> \$	from primary residence disposal			
Employer contributions		Receipt d	ate <sub>Day</sub> Month Year			
<b>A</b> \$		H1	/ /			
ABN of principal employer			le foreign superannuation fund amount			
A1 Personal contributions		I \$	and the fermion of the second			
B \$		J \$	ssable foreign superannuation fund amount			
CGT small business retirement exemption			rom reserve: assessable amount			
<b>C</b> \$		K \$				
CGT small business 15-year exemption am	nount	Transfer from reserve: non-assessable amount				
D \$		L \$				
Personal injury election  E \$		Contributions from non-complying funds and previously non-complying funds				
Spouse and child contributions		T \$				
F \$		(including	contributions Super Co-contributions and			
Other third party contributions		Low Inco	ne Super Amounts)			
<b>G</b> \$		M \$				
TOTAL CONTRIBUTIONS	*	of labels <b>A</b> to	o <b>M</b> )			
Other transactions Allo	ocated earnings or losses		Loss			
	nward					
Accumulation phase account balance	rollovers and transfers					
S1 \$	Outward					
Retirement phase account balance  – Non CDBIS	rollovers and transfers		Codo			
S2 \$	Lump Sum	R1 \$	Code			
Retirement phase account balance	payments	+	Code			
– CDBIS	Income stream	R2 \$	Code			
S3 \$	payments	+				
TDIS O. J. OLONIA ACCO	LINE DALANO	- <b>-</b> -				
TRIS Count CLOSING ACCO	ONT BALANCI	E <b>3</b> 3	( <b>S1</b> plus <b>S2</b> plus <b>S3</b> )			
			(OT plus G2 plus GG)			
Accumulat	ion phase value	X1 \$				
Retireme	ent phase value	X2 \$				
Outstanding I	Iimited recourse	. v ¢				
borrowing arrang	gement amount	Ψ				

MEMBER 2	
Title: Mr Mrs Miss Ms Other Family name	
First given name C	Other given names
Member's TFN See the Privacy note in the Declaration.	Date of birth Day Month Year
Contributions OPENING ACCOUNT E	BALANCE \$
Refer to instructions for completing these labels.	Proceeds from primary residence disposal  H \$
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 third party contributions  G \$	Receipt date Day Month Year  H1 / /  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 \$  Contributions from non-complying funds and previously non-complying funds  T \$  Any other contributions (including Super Co-contributions and Low Income Super Amounts)  M \$
TOTAL CONTRIBUTIONS N	(Sum of labels <b>A</b> to <b>M</b> )
Other transactions Allocated	d earnings or losses • \$
S1 \$  Retirement phase account balance roll	Inward lovers and transfers  Outward lovers and Q \$
Retirement phase account balance  – CDBIS	transfers  ump Sum payments  Income stream payments  R2 \$  Code  Code
TRIS Count CLOSING ACCOUNT	BALANCE \$ \$ (S1 plus S2 plus S3)
Accumulation of	hase value <b>X1</b> \$
	hase value <b>X2</b> \$

Outstanding limited recourse borrowing arrangement amount **Y** \$

#### MEMBER 3 Title: Mr Other Miss Family name First given name Other given names Day Month Member's TFN Date of birth See the Privacy note in the Declaration. OPENING ACCOUNT BALANCE \$ Contributions Proceeds from primary residence disposal Refer to instructions for completing these labels. Н \$ Employer contributions Receipt date **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 amount CGT small business 15-year exemption amount Transfer from reserve: non-assessable amount Personal injury election Contributions from non-complying funds and previously non-complying funds т Spouse and child contributions Any other contributions (including Super Co-contributions and Low Income Super Amounts) Other third party contributions G M \$ TOTAL CONTRIBUTIONS N \$ (Sum of labels A to M) Loss Other transactions Allocated earnings 0\$ or losses Inward Accumulation phase account balance rollovers and **P**\$ transfers **S1**\$ Outward Retirement phase account balance rollovers and **Q** \$ transfers Non CDBIS Code Lump Sum R1 \$ **S2** \$ payments Retirement phase account balance Code - CDBIS Income stream R2 \$ **S3**\$ payments CLOSING ACCOUNT BALANCE \$ \$ TRIS Count (S1 plus S2 plus S3) Accumulation phase value X1 \$

Page 10

Sensitive (when completed)

Retirement phase value X2 \$

Outstanding limited recourse borrowing arrangement amount

#### Section H: Assets and liabilities 15 ASSETS Listed trusts A\$ 15a Australian managed investments Unlisted trusts **B** \$ Insurance policy C\$ Other managed investments **D** \$ 15b Australian direct investments Cash and term deposits **E**\$ Limited recourse borrowing arrangements Debt securities **F** \$ Australian residential real property Loans G\$ J1 \$ Australian non-residential real property Listed shares **H** \$ **J2**\$ Unlisted shares | \$ Overseas real property **J3**\$ Limited recourse **J**\$ borrowing arrangements Australian shares Non-residential K \$ **J4**\$ real property Overseas shares Residential L\$ **J5**\$ real property Collectables and M \$ Other personal use assets **J6** \$ Other assets **O** \$ Crypto-Currency N \$ 15c Other investments 15d Overseas direct investments Overseas shares **P**\$ Overseas non-residential real property Q \$ Overseas residential real property **R** \$ Overseas managed investments **S**\$ Other overseas assets **T**\$ TOTAL AUSTRALIAN AND OVERSEAS ASSETS U\$ (Sum of labels A to T) 15e In-house assets Did the fund have a loan to, lease to \$ Yes or investment in, related parties (known as in-house assets) at the end of the income year? 15f Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA A No Yes borrowings from a licensed financial institution? Did the members or related parties of the Yes fund use personal guarantees or other security for the LRBA?

#### 16 LIABILITIES

Borrowings for limited recourse borrowing arrangements

V1 \$

Permissible temporary borrowings

**V2**\$

Other borrowings

**V3**\$

Borrowings V \$

Total member closing account balances (total of all **CLOSING ACCOUNT BALANCE**s from Sections F and G) **W** \$

Reserve accounts X \$

Other liabilities Y \$

TOTAL LIABILITIES Z \$

## Section I: Taxation of financial arrangements

17 Taxation of financial arrangements (TOFA)

Total TOFA gains **H** \$

Total TOFA losses | \$

#### Section J: Other information

#### 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 2018–19 income year, write **2019**).

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 2019.* 

#### Interposed 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 *Interposed entity election or revocation 2019* for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2019*.

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$\sim$ echon	Ν.	Dec	iarations	5



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

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 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

TRUSTEE'S OR DIRECT I declare that, the current trecords. I have received a cannual return, including any	ustees and copy of the	directors audit repo	have authorise ort (If required)	and are aware	of any mat	ters raise	d there				
Authorised trustee's, direct	or's or publ	ic officer's	signature								
							Day		Month		Year
						Date		/		/	
Preferred trustee or di	rector co	ntact de	taile					,		,	
			tans.								
Title: Mr Mrs Miss Family name	s Ms	Other									
First given name			Other g	iven names							
Phone number											
Email address											
Non-individual trustee nam	e (if applica	ble)									
ABN of non-individual trust	ee										
	Time tak	en to prep	are and comp	lete this annua	ıl return	ŀ	Hrs				
The Commissioner of Toprovide on this annual										tails wh	nich you
TAX AGENT'S DECLAI I declare that the Self-mana provided by the trustees, th correct, and that the trustee	ged supera at the trust	ees have (	given me a dec	laration stating							
Tax agent's signature											
						Date	Day	/	Month	/	Year
Tax agent's contact de	tails										
Title: Mr Mrs Miss	s Ms	Other									
Family name											
First given name			Other g	iven names							
Tax agent's practice											
Tax agent's phone number			Reference	number			Tax a	gent	numbe	r	

#### **PART A**

#### **Electronic Lodgment Declaration (Form P, T, F, SMSF or EX)**

This declaration is to be completed where the tax return is to be lodged via an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so.

#### Privacy

The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each partner or beneficiary or entity in our records. It is not an offence not to provide the TFNs. However, you cannot lodge your tax return electronically if you do not quote your TFN.

Taxation law authorises the ATO to collect information and disclose it to other government agencies, including personal information about the person authorised to sign the declaration. For information about privacy go to ato.gov.au/privacy

#### The Australian Business Register

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.

Please refer to the privacy statement on the Australian Business Register (ABR) website (www.abr.gov.au) for further information - it outlines our commitment to safeguarding your details.

#### Electronic funds transfer - direct debit

Declarations I declare that

Where you have requested an EFT direct debit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your taxation liability from your nominated account.

Tax File Number Name of Partnership, Trust, Fund or Entity Year

I authorise my tax agent to electronically transmit this tax return via an approved ATO electronic channel.

#### Important

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns.

PART B								
Signature of Pa	artner, Trustee, or		Date	/	1			
	is true and correct; and the agent is authorised to lodge this tax return.							
•	the information provided to the agent for the preparation of this tax return, including any applicable schedules							
Deciaration.	i deciare mai.							

#### **ELECTRONIC FUNDS TRANSFER CONSENT**

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic channel.

This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

#### Agent's reference number

#### **Account name**

I authorise the refund to be deposited directly to the specified account							
Signature		Date	1	/			

#### **PART D**

# Tax Agent's Certificate (shared facilities only)

#### I declare that:

- I have prepared this tax return in accordance with the information supplied by the partner, trustee, director or public officer
- I have received a declaration made by the entity that the information provided to me for the preparation of this tax return is true and correct; and

I am authorised by the partner, trustee, director or public officer to lodge this tax return, including any applicable schedules.					
Date / /					
Client Reference					
Agent's Reference Number					
1					

# Capital gains tax (CGT) schedule

2019

When	comp	letina	this	form
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- Print clearly, using a black or dark blue pen only.
- Do not use correction fluid or covering stickers.
- Sign next to any corrections with your **full signature** (not initials).
- Use in conjunction with company, trust, fund income tax return or the self-managed superannuation fund annual return.
- Refer to the *Guide to capital gains tax 2019* available on our website at **ato.gov.au** for instructions on how to complete this schedule.

#### Tax file number (TFN)

We are authorised by law to request your TFN. You do not have to quote your TFN. However, if you don't it could increase the chance of delay or error in processing your form.

#### Australian business number (ABN)

#### Taxpayer's name

1 Current year cap	pital gains and	capital losses	
Shares in companies listed on an Australian securities exchange	A \$	Capital gain	Capital loss
Other shares	B\$		L \$
Units in unit trusts listed on an Australian securities exchange	C \$		M\$
Other units	D\$		N \$
Real estate situated in Australia			<b>o</b> \$
Other real estate	F \$		P \$
Amount of capital gains from a trust (including a managed fund)	G \$		
Collectables	H \$		Q \$
Other CGT assets and any other CGT events			R \$
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	<b>s</b> \$		Add the amounts at labels <b>K</b> to <b>R</b> and write the total in item <b>2</b> label <b>A – Total current year capital losses</b> .
Total current year capital gains	J \$		

2	Capital losses	
	Total current year capital losses	<b>A</b> \$
	Total current year capital losses applied	В\$
	Total prior year net capital losses applied	C \$
	Total capital losses transferred in applied (only for transfers involving a foreign bank branch or permanent establishment of a foreign financial entity)	D \$
	Total capital losses applied	E \$
		Add amounts at B, C and D.
3	Unapplied net capital losses carried forward	
	Net capital losses from collectables carried forward to later income years	A \$
	Other net capital losses carried forward to later income years	<b>B</b> \$
		Add amounts at <b>A</b> and <b>B</b> and transfer the total to label <b>V</b> – <b>Net capital losses carried forward to later income years</b> on your tax return.
4	CGT discount	
	Total CGT discount applied	A \$
5	CGT concessions for small business	
	Small business active asset reduction	A \$
	Small business retirement exemption	B \$
	Small business rollover	C \$
	Total small business concessions applied	<b>D</b> \$
6	Net capital gain	
	Net capital gain	A \$
		1J less 2E less 4A less 5D (cannot be less than zero). Transfer the amount at A to label A – Net capital gain on your tax return.

7	Earnout arrangements					
	Are you a party to an earnout arrangement? <b>A</b> Yes, as a buyer (Print $X$ in the appropriate box.)	Yes, as a seller	No			
	If you are a party to more than one earnout arrangement, copy and details requested here for each additional earnout arrangement.	a party to more than one earnout arrangement, copy and attach a separate sheet to this schedule providing there for each additional earnout arrangement.				
	How many years does the earnout arrangement run for?	В				
	What year of that arrangement are you in?	С				
	If you are the seller, what is the total estimated capital proceeds from the earnout arrangement?	D \$	1000			
	Amount of any capital gain or loss you made under your non-qualifying arrangement in the income year.	E \$	LOSS			
	Request for amendment					
	If you received or provided a financial benefit under a look-through earn to seek an amendment to that earlier income year, complete the following		ou wish			
	Income year earnout right created	F				
	Amended net capital gain or capital losses carried forward	G \$	LOSS /			
8	Other CGT information required (if applicable)		CODE			
	Small business 15 year exemption - exempt capital gains	A \$	/			
	Capital gains disregarded by a foreign resident	B \$				
	Capital gains disregarded as a result of a scrip for scrip rollover	C \$				
	Capital gains disregarded as a result of an inter-company asset rollover	D \$				
	Capital gains disregarded by a demerging entity	E \$				

# Taxpayer's declaration

If the schedule is not lodged with the income tax return you are required to sign and date the schedule.

#### Important

Before making this declaration check to ensure that all the information required has been provided on this form and any attachments to this form, and that the information provided is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the ATO. The income tax law imposes heavy penalties for false or misleading statements.

#### **Privacy**

Taxation law authorises the ATO to collect information and disclose it to other government agencies. This includes personal information of the person authorised to sign the declaration. For information about your privacy go to ato.gov.au/privacy

I declare that the information on this form is true and correct.					
Signature					
	Date Day	Mon	th	Year	
		/	/		
Contact name					

Daytime contact number (include area code)