Self-managed superannuation fund annual return 2021

To complete this annual return
■ Print clearly, using a BLACK pen only.

■ Use BLOCK LETTERS and print one character per box.

	ome tax return 2021 (NAT 71287). The Self-managed superannuation fund annual return instructions 2021 (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).	■ Place 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				
Se	ection A: Fund information	Γ.				
1	Tax file number (TFN)	(processing, write the find pages 3, 5, 7 and 9.	und's TFN at	
•	The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual returns.		o quote your	TFN but not quoting	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 2021 return?	A No	Yes			
	Is this the first required return for a newly registered SMSF?	B No	Yes			

Who should complete this annual return?
Only self-managed superannuation funds (SMSFs) can complete

this annual return. All other funds must complete the Fund

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6 Au Title	ditor's	SF auditor name r Mrs Miss Ms Other						
Far	nily nan	me						
Firs	t given	name		Other gi	ven names			
SM	1SF Au	uditor Number Auditor's	phone n	umber				
Ро	stal ad	ddress						
Sub	ourb/to	wn					State/territory	Postcode
Da	te auc	Day Mor	nth /	Year				
Wa	s Parl	t A of the audit report qualified?	В	No	Yes			
Wa	s Parl	t B of the audit report qualified?	C	No	Yes			
		of the audit report was qualified, reported issues been rectified?	D	No	Yes			
7		ctronic funds transfer (EFT) need your self-managed super fund's f	inancial in	stitutio	n details to pay a	any super paymer	nts and tax refunds o	wing to you.
	Α	Fund's financial institution acc	ount de	etails				
		This account is used for super contril Fund BSB number Fund account name	outions a		overs. Do not pro nd account num	_	account here.	
		I would like my tax refunds made to t	his accou	unt.	Go to C.			
	В	Financial institution account d This account is used for tax refunds. BSB 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.

8	Status	of SMSF	Australian superar	nnuation fund	A No	Yes	Fund benefit structure	B Code		
		Does the Go	ne fund trust deed allow a overnment's Super Co-cor Low Income Sup	ntribution and	C No	Yes				
9	Was the		ound up during the ir If yes, provide the date on which the fund was wound	Day /	? Month	Year	Have all tax lodgment and payment obligations been met?	Yes		
10	Exemp	t current	pension income							
	Did the f	und pay re	tirement phase superanni	uation income	stream be	nefits to on	e or more members in the income	e year?		
			k exemption for current penpt current penption incom		, you must	pay at leas	t the minimum benefit payment u	nder the law.		
	No	Go to Se	ction B: Income.							
	Yes	Exempt of	current pension income ar	mount A\$						
		Which method did you use to calculate your exempt current pension income?								
			Segregated assets m	ethod B						
			Unsegregated assets m	ethod C	Was an	actuarial cer	rtificate obtained? D Yes			
	Did the f	und have a	any other income that was	s assessable?						
	E Yes	Go to	Section B: Income.							
	No	Choo Go to	sing 'No' means that you Section C: Deductions a	do not have a nd non-deduc	any assess ctible expe	able incomenses. (Do n e	e, including no-TFN quoted contri ot complete Section B: Income.)	butions.		
			itled to claim any tax offse ion D: Income tax calcula							

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. If the total capital loss or total capital gain is greater than 11 Income \$10,000 or you elected to use the transitional CGT relief in Did you have a capital gains tax G No Yes 2017 and the deferred notional gain has been realised, (CGT) event during the year? complete and attach a Capital gains tax (CGT) schedule 2021. Have you applied an M No Yes exemption or rollover? Net capital gain Gross rent and other leasing and hiring income **B** \$ Gross interest Forestry managed investment **X** \$ scheme income Gross foreign income Loss **D1**\$ Net foreign income **D** \$ **E** \$ Australian franking credits from a New Zealand company Number Transfers from F\$ foreign funds Gross payments where **H** \$ ABN not quoted Loss Calculation of assessable contributions Gross distribution Assessable employer contributions I \$ from partnerships **R1**\$ *Unfranked dividend **J** \$ amount sula Assessable personal contributions *Franked dividend **R2** \$ **K** \$ amount plus **No-TFN-quoted contributions *Dividend franking credit **R3** \$ Code *Gross trust (an amount must be included even if it is zero) **M** \$ distributions Transfer of liability to life insurance company or PST Assessable contributions **R6**\$ R\$ (R1 plus R2 plus R3 less R6) Calculation of non-arm's length income Code *Net non-arm's length private company dividends *Other income S\$ **U1** \$ *Assessable income plus *Net non-arm's length trust distributions due to changed tax T \$ status of fund Net non-arm's plus *Net other non-arm's length income length income (subject to 45% tax rate) (U1 plus U2 plus U3) U\$ **U3** \$ Loss #This is a mandatory **GROSS INCOME W** \$ label. (Sum of labels A to U) *If an amount is **Y**\$ Exempt current pension income entered at this label. check the instructions Loss TOTAL ASSESSABLE to ensure the correct INCOME (W less Y)

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tax treatment has been applied.

Section C: Deductions and non-deductible expenses

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 \$	B2 \$	
Capital works expenditure	DID	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 \$	Code
Other amounts	L1 \$	L2 \$	Code
Tax losses deducted	M1 \$		

TOTAL DEDUCTIONS

N \$

(Total A1 to M1)

*TAXABLE INCOME OR LOSS

(TOTAL ASSESSABLE INCOME less
TOTAL DEDUCTIONS)

TOTAL NON-DEDUCTIBLE EXPENSES **Y** \$

(Total A2 to L2)

TOTAL SMSF EXPENSES **Z** \$

(N plus Y)

*This is a mandatory label.

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 2021 on how to complete the calculation statement.

#Taxable income A\$

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

#Tax on taxable T1\$

income T1

#Tax on
no-TFN-quoted contributions

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

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

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\$

E4\$

Exploration credit tax offset

Refundable tax offsets

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\$

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

*Tax offset refunds

(Remainder of refundable tax offsets)

1\$

(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

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 mandatory label.

Section E: Losses

14 Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2021.

Tax losses carried forward to later income years

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

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 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. **H** \$ Employer contributions Receipt date ABN of principal employer Assessable foreign superannuation fund amount Δ1 Personal contributions Non-assessable foreign superannuation fund amount **B** \$ J CGT small business retirement exemption Transfer from reserve: assessable amount K 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 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 **Q**\$ Retirement phase account balance rollovers and Non CDBİS transfers Code Lump Sum payments R1 \$ **S2** \$ 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 \$ Retirement phase value X2 \$ Outstanding limited recourse

borrowing arrangement amount

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MEMBER 2		
Title: Mr Mrs Miss Family name	Ms Other	
First given name	(Other given names
Member's TFN See the Privacy note in the Dec	claration.	Day Month Year Day / Month /
Contributions	OPENING ACCOUNT E	BALANCE \$
Refer to instructions for contractions.	completing these labels.	Proceeds from primary residence disposal H \$
Employer contributions A \$		Receipt date Day Month Year
ABN of principal employer		Assessable foreign superannuation fund amount
Personal contributions B \$		Non-assessable foreign superannuation fund amount J \$
CGT small business retiremen	nt exemption	Transfer from reserve: assessable amount K \$
CGT small business 15-year	exemption amount	Transfer from reserve: non-assessable amount L \$
Personal injury election E \$		Contributions from non-complying funds and previously non-complying funds
Spouse and child contribution F \$	าร	T \$ Any other contributions
Other third party contribution: G \$	S	(including Super Co-contributions and Low Income Super Amounts) M \$
	ITRIBUTIONS N \$	
	(8	Sum of labels A to M)
Other transactions	Allocate	ed earnings or losses O \$
Accumulation phase ac	count balance rol	Inward Ilovers and transfers P \$
Retirement phase acco	ount balance rol	Outward llovers and transfers Q \$
S2 \$		Lump Sum payments R1 \$
Retirement phase acco - CDBIS		Income stream R2 \$
S3 \$		payments
TRIS Count	CLOSING ACCOUNT	BALANCE \$ \$ (S1 plus S2 plus S3)
	Accumulation p	hase value X1 \$
	Retirement p	hase value X2 \$
	Outstanding limited borrowing arrangeme	

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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 **J5**\$ real property Collectables and personal use assets **M** \$ Other **J6**\$ Other assets **O** \$ Property count J7 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 A No \$ Yes or investment in, related parties (known as in-house assets)

at the end of the income year?

5f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	A No Yes	
	Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	B No Yes	
16	LIABILITIES		
	Borrowings for limited recourse]	
	borrowing arrangements V1 \$		
	Permissible temporary borrowings		
	V2 \$		
	Other borrowings		
	V3\$	Borrowings V \$	
	10 0	Dollowings • •	
	Total member clos (total of all CLOSING ACCOUNT BALANCE s fro	sing account balances rom Sections F and G) W \$	
		Reserve accounts X \$	
		Other liabilities Y \$	
		TOTAL LIABILITIES Z \$	
	ction I: Taxation of financia		
17	Taxation of financial arrangements (TOF		
		Total TOFA gains H \$	
		Total TOFA losses	
Se	ction J: Other information		
am	ily trust election status		
		nily trust election, write the four-digit income year cample, for the 2020–21 income year, write 2021).	
	If revoking or varying a family trust of and complete and attach the F	election, print R for revoke or print V for variation, Family trust election, revocation or variation 2021.	
nte	posed entity election status		
	or fund is making one or more elect	write the earliest income year specified. If the trust tions this year, write the earliest income year being centity election or revocation 2021 for each election.	
		n interposed entity election, print R , and complete the <i>Interposed entity election or revocation 2021</i> .	

Section	K٠	Dec	laratio	าทร
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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 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

	stees and directors have authorised this annual return and		
	upy of the audit report and are aware of any matters raised to schedules and additional documentation is true and corre		mation on this annual
Authorised trustee's, director	's or public officer's signature		
Can	Wad	Day	Month Year
Preferred trustee or dire	ector contact details:	Date	/ /
Title: Mr Mrs Miss	Ms Other		
Family name			
First given name	Other given names		
Phone number			
Email address			
Non-individual trustee name	(if applicable)		
ABN of non-individual trustee	Э		
	Time taken to prepare and complete this annual return	Hrs	
	Time taken to prepare and complete this annual return	піъ	
	xation, as Registrar of the Australian Business Register, may us turn to maintain the integrity of the register. For further informat		
provided by the trustees, tha	ATION: ed superannuation fund annual return 2021 has been prepa t the trustees have given me a declaration stating that the in have authorised me to lodge this annual return.	ared in accordand Iformation provid	ce with information ed to me is true and
ŭ ŭ		Day Day	Month Year
Tax agent's contact det	ails		
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 ag	ent number

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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

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.

Declaration: I declare that:

the information provided to the agent for the preparation of this tax return, including any applicable schedules

is true and correct; and

the agent is authorised to lodge this tax return.

Signature of Partner, Trustee, or Director

Carlad

Date

22 / 03 / 2022

PART B

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

Carlind

Date

22 / 03 / 2022

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

r to lodge this tax return, including any applicable schedules.
Date / /
Client Reference
Agent's Reference Number
1

Capital gains tax (CGT) schedule

202%

When	comp	letina	thie	form
wileii	COILID	leuna	นแจ	101111

- Print clearly, using a black or dark blue pen only.
- Use BLOCK LETTERS and print one character in each box.

 SM/77H S77
- 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 202F* 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 ca	pital gains and	capital losses	
Shares in companies listed on an Australian securities exchange	A \$	Capital gain	Capital loss
Other shares	В\$		L \$
Units in unit trusts listed on an Australian securities exchange	C \$		M\$
Other units	D\$		N \$
Real estate situated in Australia			o \$
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	s \$		Add the amounts at labels K to R and write the total in item 2 label A – Total current year capital losses .
Total current year capital gains	J \$		

2	Total current year capital losses Total current year capital losses applied Total prior year net capital losses applied Total capital losses transferred in applied (only for transfers involving a foreign bank branch or permanent establishment of a foreign financial entity)	B \$ C \$
	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 \$
		Add amounts at A and B and transfer the total to label V – Net capital losses carried forward to later income years 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	D \$
6	Net capital gain	
-	Net capital gain	A \$
	. sa sapital gain	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.

′	Earnout arrangements		
	Are you a party to an earnout arrangement? \mathbf{A} Yes, as a buyer (Print \overline{X} in the appropriate box.)	Yes, as a seller	No
	If you are a party to more than one earnout arrangement, copy an details requested here for each additional earnout arrangement.	d attach a separate sheet to this schedule prov	riding the
	How many years does the earnout arrangement run for?	В	
	What year of that arrangement are you in?	C	
	If you are the seller, what is the total estimated capital proceeds from the earnout arrangement?	D \$	
	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 follow	· ·	you 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		
Carloted	Day	Month /	Yea /
		/	/

Contact name

Daytime contact number (include area code)

Losses schedule

202%

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 202F tax return. Superannuation funds should complete and attach this schedule to their 202F tax return.

Print neatly in BLOCK LETTERS with a black or blue ballpoint pen only. Print one letter or number in each box. Do not use correction fluid or tape.

Place X in all applicable boxes.

Refer to Losses schedule instructions 202F, available on our website ato.gov.au for instructions on how to complete this schedule.

Tax file number (TFN)

Name of entity

Australian business number

Part A - Losses carried forward to the 202%-2& income year - excludes film losses

1 Tax losses carried forward to later income years

Year of loss

20**Œ**-2F **B**

201J-Œ **C**

201Ì –1J **D**

201Ï –1Ì **E**

201Î –1Ï **F**

201Í -1Î and earlier income years

Total **U**

Transfer the amount at U to the Tax losses carried forward to later income years label on your tax return.

2 Net capital losses carried forward to later income years

Year of loss

2020–21 **H**

2019–20

201ì –19 **J**

201Ï –1Ì **K**

201Î –1Ï **L**

201Í -1Î and earlier income years

Total V

Transfer the amount at V to the Net capital losses carried forward to later income years label on your tax return.

Part B - Ownership and business continuity test - company and listed widely held trust only

Complete item 3 of Part B if a loss is being carried forward to later income years and the business continuity test has to be satis ied in relation to that loss.

Do not complete items 1 or 2 of Part B if, in the 2020-21 income year, no loss has been claimed as a deduction, applied against a net capital gain or, in the case of companies, losses have not been transferred in or out.

1 Whether continuity of majority ownership test passed

Note: If the entity has deducted, applied, transferred in or transferred out (as applicable) in the 2020-21 income year a loss incurred in any of the listed years, print X in the Yes or No box to indicate whether the entity has satisfied the continuity of majority ownership test in respect of that loss.

2020–21	A	Yes	
2019–20	В	Yes	

Year of loss

2018–19 **C** No

No

No

No

2017–18 **D** No

2016-17 **E** Yes 2015-16 and earlier No

2 Amount of losses deducted/applied for which the continuity of majority ownership test is not passed but the business continuity test is satisfied - excludes film losses

Tax losses G

Net capital losses H

income vears

3 Losses carried forward for which the business continuity test must be satisfied before they can be deducted/ applied in later years - excludes film losses

Tax losses

Net capital losses

4 Do current year loss provisions apply?

Is the company required to calculate its taxable income or tax loss for the year under Subdivision 165-B or its net capital gain or net capital loss for the year under Subdivision 165-CB of the Income Tax Assessment Act

K Yes No

Part C - Unrealised losses - company only

Note: These questions relate to the operation of Subdivision 165-CC of ITAA 1997.

Has a changeover time occurred in relation to the company after 1.00pm by legal time in the Australian Capital Territory on 11 November 1999?

Yes No

If you printed **X** in the **No** box at **L**, do not complete **M**, **N** or **O**.

At the changeover time did the company satisfy the maximum net asset value test under section 152-15 of ITAA 1997?

Yes No

If you printed X in the No box at M, has the company determined it had an unrealised net loss at the changeover time?

No

If you printed \boldsymbol{X} in the \boldsymbol{Yes} box at \boldsymbol{N} , what was the amount of unrealised net loss calculated under section 165-115E of ITAA 1997?

Part D - Life insurance companies

- Complying superannuation class tax losses carried forward to later income years
- Complying superannuation net capital losses carried forward to later income years

Part E - Controlled foreign company losses

- Current year CFC losses M
 - CFC losses deducted N
- CFC losses carried forward O

Part F - Tax losses reconciliation statement

- Balance of tax losses brought forward from the prior income year A
- ADD Uplift of tax losses of designated infrastructure project entities **B**
 - SUBTRACT Net forgiven amount of debt C
 - ADD Tax loss incurred (if any) during current year D
 - ADD Tax loss amount from conversion of excess franking offsets
 - SUBTRACT Net exempt income | |
 - SUBTRACT Tax losses forgone G
 - SUBTRACT Tax losses deducted
- SUBTRACT Tax losses transferred out under Subdivision 170-A (only for transfers involving a foreign bank branch or a PE of a foreign financial entity)
 - Total tax losses carried forward to later income years **J**

Transfer the amount at **J** to the **Tax losses carried forward to later income years** label on your tax return.

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

Taxpayer's declaration

I declare that the information on this form is true and correct.

Signature					
Carlind	Da	Day	Month	1 /	Yea
Contact person	Daytime conf	act numb	er (include	area co	de)