

Self managed superannuation fund annual return 2021

RN: 100016479MS

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 2021 (NAT 71287).

The Self-managed superannuation fund annual return 2021 instructions (NAT 71609) (the instructions) can assist you to complete this annual return.

Section A: Fund information

1 Tax file number (TFN)

771 757 681

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

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 Name of self-managed superannuation fund (SMSF)

Hamilton Superannuation Fund

3 Australian business number (ABN) (if applicable)

85 467 569 143

4 Current postal address*

PO Box 154

Suburb or town SANDY BAY

State TAS Postcode 7006

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

6 SMSF auditor

Auditor's name

Title Mr

Family name

Robert 13048

First given name

Errol Anthony

SMSF Auditor Number

100260451

Auditor's phone number

04 6979400

Postal address*

PO Box 154 3375

Suburb or town Moerbank

Day Month Year

Date audit was completed A 01/07/2021

Was Part A of the audit report qualified?

B No Yes

Was Part B of the audit report qualified?

C No Yes

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

D No Yes

SMSF annual return 2021 for Hamilton Superannuation Fund

RN: 100016479MS TFN 771 757 681

7 Electronic funds transfer (EFT)

We need your self-managed 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 (must be six digits) 037001

Fund Account number 679405

Fund account name (for example, J&Q Citizen ATF J&Q Family SF) Kajang Pty Ltd - Hamilton Super

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

B Financial institution details for tax refunds only

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

BSB number (must be six digits) 037001

Account number 679480

Account name (for example, J&Q Citizen ATF J&Q Family SF) Hamilton Super Fund

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 superannuation fund A No Yes Fund benefit structure * B A Code

Does the fund trust deed allow acceptance of the * Government's Super Co-contributions and Low Income Super Contributions?

C No Yes

9 Was the fund wound up during the income year?

No Yes If yes, provide the date on Day Month Year Have all tax lodgment obligations been met? No Yes

10 Exempt current pension income

Did the fund pay an income stream 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 \$ 84916.00

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 contributions. Go to Section C: Deductions and non-deductible expenses. (Do not complete Section B: Income) If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.

Section F: Member information

In Section F report all current members in the fund at 30 June.
Use Section G to report any former members or deceased members who held an interest in the fund at any time during the income year.

MEMBER NUMBER **1** Account status Code

Title: Suffix

Family name Hamilton Other given names Ranchitham

First given name Thana

Member's TFN 410 388 533

Date of birth 22/06/1960 If deceased, date of death

Proceeds from primary residence disposal H \$ Day Month Year

Receipt date H1 Day Month Year

Contributions

OPENING ACCOUNT BALANCE \$ **1017252.96**

Employer contributions	A	\$	20500.00
ABN of principal employer	A1		64 097 210 583
Personal contributions	B	\$	100000.00
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	\$	
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 Contributions)	M	\$	
TOTAL CONTRIBUTIONS	N	\$	120500.00

Accumulation phase account balance

S1 \$ **1443128.84** Allocated earnings or losses Loss

Retirement phase account balance - Non CDBIS

S2 \$ **0.00** Inward rollovers and transfers

Retirement phase account balance - CDBIS

S3 \$ **0.00** Lump Sum Payment

TRIS Count 0

Accumulation phase value 0

X1 \$ **0.00** Income stream payment

Retirement phase value 0

X2 \$ **0.00** Outstanding limited recourse borrowing arrangement amount

Y \$ **0.00**

CLOSING ACCOUNT BALANCE S \$ **1443128.84**

Sensitive (when completed)

Section F: Member information

In Section F report all current members in the fund at 30 June.
Use Section G to report any former members or deceased members who held an interest in the fund at any time during the income year.

MEMBER NUMBER **2** Account status Code

Title: Mr Suffix

Family name Hamilton Other given names Mark

First given name Ian

Member's TFN 402 693 871

Date of birth 18/01/1999 If deceased, date of death

Proceeds from primary residence disposal H \$ Day Month Year

Receipt date H1 Day Month Year

Contributions

OPENING ACCOUNT BALANCE \$ **706466.41**

Employer contributions	A	\$	25000.00
ABN of principal employer	A1		
Personal contributions	B	\$	100000.00
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	\$	
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 Contributions)	M	\$	
TOTAL CONTRIBUTIONS	N	\$	125000.00

Accumulation phase account balance

S1 \$ **1041878.85** Allocated earnings or losses Loss

Retirement phase account balance - Non CDBIS

S2 \$ **0.00** Inward rollovers and transfers

Retirement phase account balance - CDBIS

S3 \$ **0.00** Lump Sum Payment

TRIS Count 0

Accumulation phase value 0

X1 \$ **0.00** Income stream payment

Retirement phase value 0

X2 \$ **0.00** Outstanding limited recourse borrowing arrangement amount

Y \$ **0.00**

CLOSING ACCOUNT BALANCE S \$ **1041878.85**

Sensitive (when completed)

Capital gains tax (CGT) schedule 2021

- 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 2021 available on our website at ato.gov.au for instructions on how to complete this schedule.

Tax file number (TFN) **771 757 681**

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) **85 467 569 143**

Taxpayer's name
Hamilton Superannuation Fund

1 Current year capital gains and capital losses

	Capital gain	Capital loss
Shares in companies listed on an Australian securities exchange	A \$ 11822.00	K \$ 108925.00
Other shares	B \$.00	L \$.00
Units in unit trusts listed on an Australian securities exchange	C \$.00	M \$.00
Other units	D \$.00	N \$.00
Real estate situated in Australia	E \$.00	O \$.00
Other real estate	F \$.00	P \$.00
Amount of capital gains from a trust (including a managed fund)	G \$.00	Q \$.00
Collectables	H \$.00	R \$.00
Other CGT assets and any other CGT events	I \$.00	

Amount of capital gains previously deferred under transitional CGT relief for superannuation funds

Total current year capital gains **J \$ 11822.00**

Add the amounts at labels K to R and write the total in item 2 label A - Total current year capital gains

Part A Electronic lodgment declaration (Form P, T, C, F, SMSF or EX)

This declaration is to be completed where the tax return is to be lodged via the Tax Office's electronically. 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, lodgments cannot be accepted electronically if the TFN is not quoted.

Taxation law authorises the ATO to collect information and to 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

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 **771 757 681** Year **2021**

Name of Partnership, Trust, Fund or Entity **Hamilton Superannuation Fund**

Total Income or Loss	310624	Total Deductions or Loss	440	Taxable Income or Loss	310184
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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:
- All of the information I have provided to the agent for the preparation of this document is true and correct.
 - I authorise the agent to give this document to the Commissioner of Taxation.

Signature of Partner, Trustee or Director  Date **27/7/21**

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, your 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.

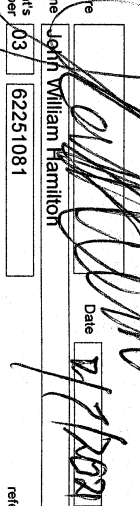
EFT Account **037 001 - 679 480** **Hamilton Super Fund**

I authorise the refund to be deposited directly to the specified account.

Agent's reference number **57669007** Signature  Date **27/7/21**

Part D Tax agent's certificate (shared facility users 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.

Agent's signature  Date **27/7/21**

Contact name **John William Hamilton** Client's reference **HAMILTSF**

Agent's phone number **03 62251081** Agent's reference number **57669007**

Losses schedule 2021

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2021 tax return. Superannuation funds should complete and attach this schedule to their 2021 tax return.

Notes to help you prepare this schedule are provided in the Losses schedule instructions 2021, available from the Tax Office

Tax file number (TFN)
771 757 681

Name of entity
Hamilton Superannuation Fund

Australian business number (ABN)
65 467 569 143

Part A Losses carried forward to the 2021-22 income year - excludes film losses

1 Tax losses carried forward to later income years

Year of loss	
2020-21	B <input type="text" value="0.00"/>
2019-20	C <input type="text" value="0.00"/>
2018-19	D <input type="text" value="0.00"/>
2017-18	E <input type="text" value="0.00"/>
2016-17	F <input type="text" value="0.00"/>
2015-16 and earlier income years	G <input type="text" value="0.00"/>
Total	U <input type="text" value="0.00"/>

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 <input type="text" value="97103.00"/>
2019-20	I <input type="text" value="89448.00"/>
2018-19	J <input type="text" value="0.00"/>
2017-18	K <input type="text" value="0.00"/>
2016-17	L <input type="text" value="0.00"/>
2015-16 and earlier income years	M <input type="text" value="0.00"/>
Total	V <input type="text" value="186551.00"/>

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

Sensitive (when completed)

Part B Ownership and same business 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 same business test has to be satisfied in relation to that loss. Do not complete items 1, 2 or 4 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, 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.

Year of loss		
2020-21	A <input type="checkbox"/> Yes <input type="checkbox"/> No	Print X in the appropriate box.
2019-20	B <input type="checkbox"/> Yes <input type="checkbox"/> No	Print X in the appropriate box.
2018-19	C <input type="checkbox"/> Yes <input type="checkbox"/> No	Print X in the appropriate box.
2017-18	D <input type="checkbox"/> Yes <input type="checkbox"/> No	Print X in the appropriate box.
2016-17	E <input type="checkbox"/> Yes <input type="checkbox"/> No	Print X in the appropriate box.
2015-16 and earlier income years	F <input type="checkbox"/> Yes <input type="checkbox"/> No	Print X in the appropriate box.

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

Tax losses	G <input type="text" value="0.00"/>
Net capital losses	H <input type="text" value="0.00"/>

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

Tax losses	I <input type="text" value="0.00"/>
Net capital losses	J <input type="text" value="0.00"/>

4 Do current year loss provisions apply?

Is the company required to calculate its taxable income or tax loss for the year under Subdivision 155-B or its net capital gain or net capital loss for the year under Subdivision 155-CB of the Income Tax Assessment Act 1997 (ITAA 1997)?

K Yes No X Print X in the appropriate box.

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 1.00 pm by legal time in the Australian Capital Territory on 11 November 1997?

L Yes No Print X in the appropriate box.

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?

M Yes No Print X in the appropriate box.

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

N Yes No Print X in the appropriate box.

If you printed X in the Yes box at N, what was the amount of unrealised net loss calculated under section 165-15E of ITAA 1997?

O

Part D Life insurance companies

Complying superannuation class tax losses carried forward to later income years	P <input type="text" value="0.00"/>
Complying superannuation net capital losses carried forward to later income years	Q <input type="text" value="0.00"/>

Sensitive (when completed)

Capital gain worksheet

Description of asset	Type	Date acquired	CGT date	Disposal amount
Coca Cola	A	01/07/2010	17/02/2021	50816
<input checked="" type="checkbox"/> Discount method <input type="checkbox"/> Active asset <input type="checkbox"/> Rollover or exemption Expenses associated with the asset Date Description Amount Doc Capital Gain before discount Indexed Deductions Adjustment 01/07/2010 p 40079 40079				
Intigen Energy	A	01/07/2012	27/07/2020	3213
<input checked="" type="checkbox"/> Discount method <input type="checkbox"/> Active asset <input type="checkbox"/> Rollover or exemption Expenses associated with the asset Date Description Amount Doc Capital Gain before discount Indexed Deductions Adjustment 01/07/2012 p 2128 2128				
Webcentral Group	A	01/07/2018	08/09/2020	3396
<input checked="" type="checkbox"/> Discount method <input type="checkbox"/> Active asset <input type="checkbox"/> Rollover or exemption Expenses associated with the asset Date Description Amount Doc Less capital proceeds Indexed Deductions Adjustment 01/07/2018 p 65173 65173				
Alumina	A	01/07/2005	17/03/2021	82565
<input checked="" type="checkbox"/> Discount method <input type="checkbox"/> Active asset <input type="checkbox"/> Rollover or exemption Expenses associated with the asset Date Description Amount Doc Less capital proceeds Indexed Deductions Adjustment 01/07/2005 p 102904 102904				
Cadence Capital Ltd	A	01/05/2015	26/04/2021	88191
<input checked="" type="checkbox"/> Discount method <input type="checkbox"/> Active asset <input type="checkbox"/> Rollover or exemption Expenses associated with the asset Date Description Amount Doc Less capital proceeds Indexed Deductions Adjustment 01/05/2015 p 115000 115000				

Capital gain worksheet

CGT Summary		Non-active assets		Active assets		Total
		Collectables	Other assets	Non-concess.	Concessional	
Gross Capital Gains	< 12 months Indexed					
	Discounted					
Current year capital losses			108925			11822
Current year CL applied			11822			
Prior year capital losses						
Prior year CL applied						
CL carried forward			186551			186551
Net Capital Gains	< 12 months Indexed					
	Discounted					
Applying CGT discount						
Active asset reduction						
15 years exemption						
Retirement exemption						
Rollover relief						
Net Capital Gain						0

Credit for amounts withheld from foreign resident capital gains withholding

Annual taxation statement

Payer
Apa 2 Code

	\$ Amount	\$ Share	Share %
Gross interest			
Tax withheld on gross interest			
Primary production income			
Deductions incurred in deriving primary production income			
Non-primary production income			
Franking distributions from trusts			
Deductions incurred in deriving non-primary production income			
Tax withheld were ABN not quoted			
Franking credits			
TFN amounts withheld			
Credits for tax withheld from closely held trusts			
Credits for tax paid by trustee			
Credits from foreign resident withholding			
National rental affordability scheme tax offset			
Total current capital gains			
Net capital gains			
Assessable foreign source income			
Other net foreign source income			
Foreign tax credit			
Australian franking credits from New Zealand company			
Management fee refund			
Other deductions			

Annual taxation statement

Payer
Apa 3 Code

	\$ Amount	\$ Share	Share %
Gross interest			
Tax withheld on gross interest			
Primary production income			
Deductions incurred in deriving primary production income			
Non-primary production income			
Franking distributions from trusts			
Deductions incurred in deriving non-primary production income			
Tax withheld were ABN not quoted			
Franking credits			
TFN amounts withheld			
Credits for tax withheld from closely held trusts			
Credits for tax paid by trustee			
Credits from foreign resident withholding			
National rental affordability scheme tax offset			
Total current capital gains			
Net capital gains			
Assessable foreign source income			
Other net foreign source income			
Foreign tax credit			
Australian franking credits from New Zealand company			
Management fee refund			
Other deductions			

Worksheets and Attachments

Gross interest Description various	Amount
Totals:	0.00

Foreign income Description Macquarie Atlas	TFN Amt	Gross 16422	%Share 100
Totals:	0.00	16422	

Dividends Description	Unfrank amt	Franked amt	F/Credits
Totals:	0.00	0.00	0.00

Gross trust distributions

Description	Amount	Code
Apa 2	3280	P
Apa 3		P
APA		
Stockland		P
Shopping Centres Australasia P		P
360 Capital		P
Totals:	3280	

Exempt current pension income

Description exempt pension income 338040* 25.12%	Amount 84916.00
Totals:	84916.00

Foreign income tax offset

Description Former manual entry Shopping Centres Australasia P	Amount
Totals:	0.00

Complying funds's franking credits tax offset

Description Former manual entry Transuban 360 Capital	Amount
Totals:	0.00

Worksheets and Attachments

Totals:	Amount
PAYG instalments raised Description nil	0.00

Annual taxation statement

Payer **Shopping Centres Australasia P** Code **P**

	\$ Amount	\$ Share	Share %
Gross interest			
Tax withheld on gross interest			
Primary production income			
Deductions incurred in deriving primary production income			
Non-primary production income			
Franking distributions from trusts			
Deductions incurred in deriving non-primary production income			
Tax withheld were ABN not quoted			
Franking credits			
TFN amounts withheld			
Credits for tax withheld from closely held trusts			
Credits for tax paid by trustee			
Credits from foreign resident withholding			
National rental affordability scheme tax offset			
Total current capital gains			
Net capital gains			
Assessable foreign source income			
Other net foreign source income			
Foreign tax credit			
Australian franking credits from New Zealand company			
Management fee refund			
Other deductions			

Annual taxation statement

Payer **360 Capital** Code **P**

	\$ Amount	\$ Share	Share %
Gross interest			
Tax withheld on gross interest			
Primary production income			
Deductions incurred in deriving primary production income			
Non-primary production income			
Franking distributions from trusts			
Deductions incurred in deriving non-primary production income			
Tax withheld were ABN not quoted			
Franking credits			
TFN amounts withheld			
Credits for tax withheld from closely held trusts			
Credits for tax paid by trustee			
Credits from foreign resident withholding			
National rental affordability scheme tax offset			
Total current capital gains			
Net capital gains			
Assessable foreign source income			
Other net foreign source income			
Foreign tax credit			
Australian franking credits from New Zealand company			
Management fee refund			
Other deductions			

Annual taxation statement

Payer Stockland Code P

	\$ Amount	\$ Share	Share %
Gross interest			
Tax withheld on gross interest			
Primary production income			
Deductions incurred in deriving primary production income			
Non-primary production income			
Franking distributions from trusts			
Deductions incurred in deriving non-primary production income			
Tax withheld were ABN not quoted			
Franking credits			
TFN amounts withheld			
Credits for tax withheld from closely held trusts			
Credits for tax paid by trustee			
Credits from foreign resident withholding			
National rental affordability scheme tax offset			
Total current capital gains			
Net capital gains			
Assessable foreign source income			
Other net foreign source income			
Foreign tax credit			
Australian franking credits from New Zealand company			
Management fee refund			
Other deductions			

Annual taxation statement

Payer Apa Code P

	\$ Amount	\$ Share	Share %
Gross interest			
Tax withheld on gross interest			
Primary production income			
Deductions incurred in deriving primary production income			
Non-primary production income			
Franking distributions from trusts			
Deductions incurred in deriving non-primary production income			
Tax withheld were ABN not quoted			
Franking credits			
TFN amounts withheld			
Credits for tax withheld from closely held trusts			
Credits for tax paid by trustee			
Credits from foreign resident withholding			
National rental affordability scheme tax offset			
Total current capital gains			
Net capital gains			
Assessable foreign source income			
Other net foreign source income			
Foreign tax credit			
Australian franking credits from New Zealand company			
Management fee refund			
Other deductions			

Part E Controlled foreign company losses

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

F

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 losses incurred (if any) during current year **D**
 ADD Tax losses amount from conversion of excess franking offsets **E**
 SUBTRACT Net exempt income **F**
 SUBTRACT Tax losses forgone **G**
 SUBTRACT Tax losses deducted **H**
 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) **I**
 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.

F

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 income has been disclosed and the tax return, all attached schedules and any additional documents are 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.
TAXPAYER'S DECLARATION
 I declare that the information on this form is true and correct.

Signature
 Date Day Month Year
 Contact person
 Daytime contact number
 Area code Number

Capital gains tax (CGT) schedule 2021
for Hamilton Superannuation Fund

RN: 100017189BW
TFN 771 757 681

2 Capital losses

Net capital losses from collectables carried forward to later income years

Total current year capital losses applied **A \$**

Total current year capital losses applied **B \$**

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

Other net capital losses 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 \$**

11 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? **A** Yes, as a buyer Yes, as a seller No

If you are a party to more than one earnout arrangement, copy and attach a separate sheet to this schedule providing the details requested here for each additional earnout arrangement

How many years does the earnout arrangement run for? **B**

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 \$**

Request for amendment

If you received or provided a financial benefit under a look-through earnout right created in an earlier income year and you wish to seek an amendment to that earlier income year, complete the following:

Income year earnout right created **F**

Amended net capital gain or capital losses carried forward **G \$**

8 Other CGT information required (if applicable)

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.

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

Signature

Date

Contact person

Daytime contact number

Section F: Member information

In Section F report all current members in the fund at 30 June.
Use Section G to report any former members or deceased members who held an interest in the fund at any time during the income year.

MEMBER NUMBER 3

Title: **MR** Account status Code

Family name **Hamilton** Suffix

First given name **Alan** Other given names **Evan**

Member's TFN

See the Privacy note in the Declaration

Date of birth Day Month Year **10/07/2004** If deceased, date of death Day Month Year

Proceeds from primary residence disposal **H \$** Day Month Year

Receipt date **H1** Day Month Year

Contributions

OPENING ACCOUNT BALANCE \$ 620906.06

Employer contributions **A \$ 12000.00**

ABN of principal employer **A1**

Personal contributions **B \$ 100000.00**

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 \$**

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 Contributions) **M \$**

TOTAL CONTRIBUTIONS N \$ 112000.00

Allocated earnings or losses **O \$ 185575.01** Loss

Inward rollovers and transfers **P \$** Outward rollovers and transfers **Q \$**

Lump Sum payment **R1 \$** Code

Income stream payment **R2 \$** Code

Outstanding limited recourse borrowing arrangement amount **Y \$ 0.00**

Accumulation phase value **X1 \$ 0.00**

Retirement phase value **X2 \$ 0.00**

CLOSING ACCOUNT BALANCE S \$ 918481.07

Sensitive (when completed)

Section F: Member information

In Section F report all current members in the fund at 30 June.
Use Section G to report any former members or deceased members who held an interest in the fund at any time during the income year.

MEMBER NUMBER 4

Title: **DR** Account status Code

Family name **Hamilton** Suffix

First given name **John** Other given names **William**

Member's TFN

See the Privacy note in the Declaration

Date of birth Day Month Year **24/05/1944** If deceased, date of death Day Month Year

Proceeds from primary residence disposal **H \$** Day Month Year

Receipt date **H1** Day Month Year

Contributions

OPENING ACCOUNT BALANCE \$ 3739619.79

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 \$**

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 Contributions) **M \$**

TOTAL CONTRIBUTIONS N \$

Allocated earnings or losses **O \$ 1133649.63** Loss

Inward rollovers and transfers **P \$** Outward rollovers and transfers **Q \$**

Lump Sum payment **R1 \$ 328419.20** Code **A**

Income stream payment **R2 \$ 48000.00** Code **M**

Outstanding limited recourse borrowing arrangement amount **Y \$ 0.00**

Accumulation phase value **X1 \$ 0.00**

Retirement phase value **X2 \$ 0.00**

CLOSING ACCOUNT BALANCE S \$ 4496850.22

Sensitive (when completed)

16 LIABILITIES

Borrowings for limited recourse borrowing arrangements	V1	\$	.00
Permissible temporary borrowings	V2	\$	.00
Other borrowings	V3	\$	.00
Borrowings	V	\$	.00

Total member closing account balances (total of all CLOSING ACCOUNT BALANCES from Sections F and G)

Reserve accounts	W	\$	7900339.00
Other liabilities	X	\$	.00
Other liabilities	Y	\$	.00
TOTAL LIABILITIES	Z	\$	7900339.00

Section I: Taxation of financial arrangements
17 Taxation of financial arrangements (TOFA)

Total TOFA gains	H	\$	.00
Total TOFA losses	I	\$	.00

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 2020-21 income year, write 2021).

A

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 2021.

B

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 2021* for each election.

C

If revoking an interposed entity election, print R, and complete and attach the *Interposed entity election or revocation 2021*.

D

Interposed entity election status

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 are in doubt about any aspect of the annual return, place all the facts before the ATO.

Privacy
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 DIRECTOR'S DECLARATION:

I declare that, the current trustee and directors have authorised this annual return and it is documented as such in the SMSF's records. I have reviewed the content of the annual return 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

[Signature]

Date Day Month Year

Registered trustee or director contact details:

Title: DR

Family name* Hamilton Suffix

First given name John Other given names William

Phone number 03 62251081

Email address jonhan@southernphone.com.au

Non-individual trustee name (if applicable) Kalgang Pty Ltd

ABN of non-individual trustee 64 097 210 583

Time taken to prepare and complete this annual return

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 *Self-managed superannuation fund annual return 2021* 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 *[Signature]* Date Day Month Year

Tax agent's contact details:

Title: DR Suffix

Family name Hamilton Other given names William

First given name John

Tax agent's practice Hamilton Accounting Services

Tax agent's phone number 03 62251081 Reference number HAMILTSF Tax agent number 57669007

Postal address for annual returns: Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY

16 LIABILITIES

Borrowings for limited recourse borrowing arrangements	V1	\$	.00
Permissible temporary borrowings	V2	\$	.00
Other borrowings	V3	\$	.00
Borrowings	V	\$	.00

Total member closing account balances (total of all CLOSING ACCOUNT BALANCES from Sections F and G)

Reserve accounts	W	\$	7900339.00
Other liabilities	X	\$	.00
Other liabilities	Y	\$	.00
TOTAL LIABILITIES	Z	\$	7900339.00

Section I: Taxation of financial arrangements
17 Taxation of financial arrangements (TOFA)

Total TOFA gains	H	\$	.00
Total TOFA losses	I	\$	.00

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 2020-21 income year, write 2021).

A

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 2021.

B

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 2021* for each election.

C

If revoking an interposed entity election, print R, and complete and attach the *Interposed entity election or revocation 2021*.

D

Interposed entity election status

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 are in doubt about any aspect of the annual return, place all the facts before the ATO.

Privacy
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 DIRECTOR'S DECLARATION:

I declare that, the current trustee and directors have authorised this annual return and it is documented as such in the SMSF's records. I have reviewed the content of the annual return 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

[Signature]

Date Day Month Year

Registered trustee or director contact details:

Title: DR

Family name* Hamilton Suffix

First given name John Other given names William

Phone number 03 62251081

Email address jonhan@southernphone.com.au

Non-individual trustee name (if applicable) Kalgang Pty Ltd

ABN of non-individual trustee 64 097 210 583

Time taken to prepare and complete this annual return

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 *Self-managed superannuation fund annual return 2021* 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 *[Signature]* Date Day Month Year

Tax agent's contact details:

Title: DR Suffix

Family name Hamilton Other given names William

First given name John

Tax agent's practice Hamilton Accounting Services

Tax agent's phone number 03 62251081 Reference number HAMILTSF Tax agent number 57669007

Postal address for annual returns: Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY

Section B: Income

Do not complete this section if your fund was in full pension phase for the entire year and there was no other income that was assessable. If you are entitled to claim any tax offsets, you can record these at Section D: Income tax calculation statement.

11 Income
Did you have a capital gains tax (CGT) event during the year? **G** No **Yes** If the total capital loss or total capital gain is greater than \$10,000 complete and attach a Capital gains tax (CGT) schedule 2021.

Have you applied an exemption or rollover? **M** No **Yes**

Net capital gain **A** \$ 0.00
Gross rent and other leasing and hiring income **B** \$.00
Gross interest **C** \$ 79.00
Forestry managed investment scheme income **X** \$.00

Gross foreign income **D** \$ 16422.00
Net foreign income **D** \$ 16422.00

Australian franking credits from a New Zealand company **E** \$.00

Transfers from foreign funds **F** \$.00

Gross payments where ABN not quoted **H** \$.00

Gross distribution from partnerships **I** \$.00

*Unfranked dividend amount **J** \$ 31290.00

*Franked dividend amount **K** \$ 200878.00

*Dividend franking credit **L** \$ 86091.00

*Gross trust distributions **M** \$ 3280.00

Assessable contributions **R** \$ 57500.00
(R1 plus R2 plus R3 less R5)

Calculation of assessable contributions
Assessable employer contributions **R1** \$ 57500.00
Plus Assessable personal contributions **R2** \$.00
Plus *No-TFN quoted contributions **R3** \$.00
Less Transfer of liability to life insurance company or PST **R5** \$.00

Calculation of non-arm's length income
Net non-arm's length private company dividends **U1** \$.00
Plus Net non-arm's length trust distributions **U2** \$.00
Plus Net other non-arm's length income **U3** \$.00

Other income **S** \$.00
*Assessable income due to changed tax status of fund **T** \$.00
Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3) **U** \$.00

*This is a mandatory label.
*If an amount is entered at this label, check the instructions to ensure the correct tax treatment has been applied.

GROSS INCOME **W** \$ 395540.00
(Sum of labels A to U)
Exempt current pension income **Y** \$ 84916.00
TOTAL ASSESSABLE INCOME **V** \$ 310624.00
(W less Y)

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

Interest expenses within Australia **A1** \$.00

Interest expenses overseas **B1** \$.00

Capital works expenditure **D1** \$.00

Decline in value of depreciating assets **E1** \$.00

Insurance premiums - members **F1** \$.00

SMSF auditor fee **H1** \$ 440.00

Investment expenses **I1** \$.00

Management and administration expenses **J1** \$.00

Forestry managed investment scheme expense **U1** \$.00

Other amounts **L1** \$.00

Tax losses deducted **M1** \$.00

NON-DEDUCTIBLE EXPENSES

A2 \$.00

B2 \$.00

D2 \$.00

E2 \$.00

F2 \$.00

H2 \$ 0.00

I2 \$.00

J2 \$.00

U2 \$.00

L2 \$.00

TOTAL DEDUCTIONS **N** \$ 440.00
(Total A1 to M1)

TAXABLE INCOME OR LOSS **O** \$ 310184.00
(Total assessable income less total deductions)

TOTAL NON-DEDUCTIBLE EXP. **Y** \$ 0.00
(Total A2 to L2)

TOTAL SMSF EXPENSES **Z** \$ 440.00
(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.

13 Calculation statement

Taxable income **A** \$ 310184.00
(an amount must be included even if it is zero)
Tax on taxable income **T1** \$ 46527.60
(an amount must be included even if it is zero)
Tax on No-TFN quoted contributions **J** \$ 0.00
(an amount must be included even if it is zero)

Gross tax **B** \$ 46527.60
(T1 plus J)