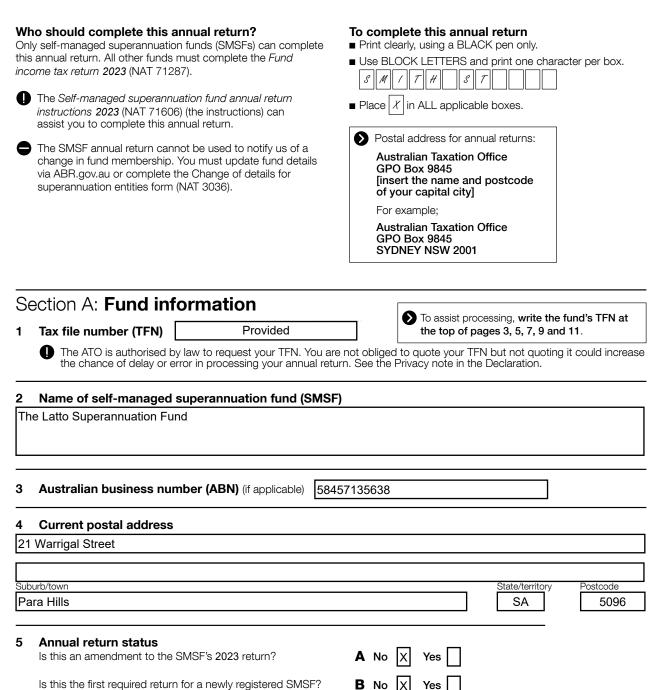
Self-managed superannuation 2023 fund annual return



Is this the first required return for a newly registered SMSF?

Yes

6

SMSF auditor

| Auditor's name |
|---|
| Title: Mr X Mrs Miss Ms Other |
| Family name |
| Boys |
| First given name Other given names |
| Anthony William |
| SMSF Auditor Number Auditor's phone number |
| 100014140 0410712708 |
| Postal address |
| PO Box 3376 |
| |
| Suburb/town State/territory Postcode |
| Rundle Mall SA 5000 |
| Date audit was completed A A / Month Year |
| Was Part A of the audit report qualified? B No X Yes |
| Was Part B of the audit report qualified? C No X Yes |
| If Part B of the audit report was qualified, have the reported issues been rectified? D No Yes |

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 | 035202 | Fund account number | 121425 | | | | |
|-------------------------------|--------|---------------------|--------|--|--|--|--|
| Fund account name | | | | | | | |
| The Latto Superannuation Fund | | | | | | | |

I would like my tax refunds made to this account. \mathbf{X} 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.

| | | | | Тах | File Number | Provided | |
|----|----------------------|--|----------------|-----------------|--|--------------|---------------|
| 8 | Status of SMSF | Australian superannuation fund | A No | Yes X | Fund benefit | structure | B A Code |
| | | e fund trust deed allow acceptance of /ernment's Super Co-contribution and Low Income Super Amounts? | C No | Yes 🗙 | | | |
| 9 | Was the fund wo | ound up during the income year? | 2 | | | | |
| | No 🗙 Yes 🚺 | If yes, provide the date on which the fund was wound up / | Month | Year | Have all tax lod and pa obligations beer | iyment No | Yes |
| 10 | Exempt current | pension income | | | | | |
| | Did the fund pay ret | irement phase superannuation income | stream benefit | ts to one or | more members ir | n the income | e year? |
| | | exemption for current pension income, ot current pension income at Label A . | you must pay | at least the | minimum benefit | payment ur | nder the law. |
| | No X) Go to Sec | tion B: Income. | | | | | |
| | Yes D Exempt c | urrent pension income amount A\$ | | | | | |
| | Which me | thod did you use to calculate your exer | npt current pe | ension incom | ie? | | |
| | | Segregated assets method B | | | | | |
| | | Unsegregated assets method C | Was an actu | arial certifica | te obtained? | Yes | |
| | Did the fund have a | ny other income that was assessable? | | | | | |
| | E Yes Go to | Section B: Income. | | | | | |
| | | sing 'No' means that you do not have a Section C: Deductions and non-deduc | | | | | butions. |
| | | led to claim any tax offsets, you can lis on D: Income tax calculation statement | | | | | |

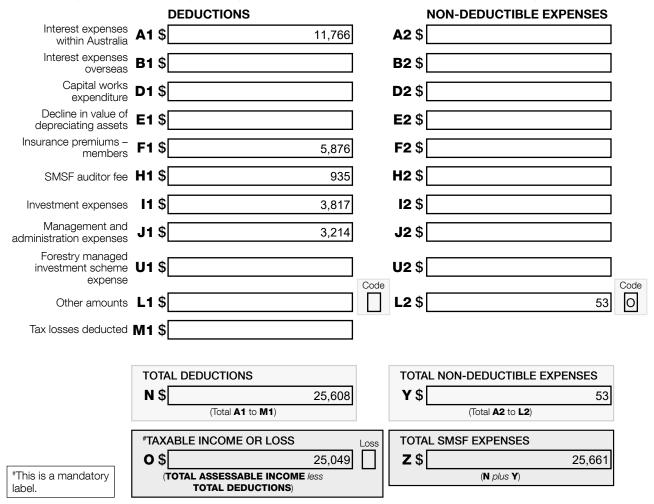
| Section B: Incom | e | | | |
|---|---|-------------------|---|--------------------------|
| the retirement phase for the enti | re year, there was no other in | come that v | were supporting superannuation incom was assessable, and you have not realis ese at Section D: Income tax calculation | ed a deferred |
| 11 Income Did you have a capital g (CGT) event during th | | \$10,00 2017 a | otal capital loss or total capital gain is grea 10 or you elected to use the transitional C Ind the deferred notional gain has been re ate and attach a <i>Capital gains tax (CGT)</i> s | GT relief in ealised, |
| Have you ap exemption or r | | Code | | |
| | Net capital | gain A \$ | | |
| Gross rent ar | nd other leasing and hiring inc | ome B \$ | 15,600 | |
| | Gross inte | erest C\$ | 57 | |
| | Forestry managed investr scheme inc | | | |
| Gross foreign income | | ome | | Loss |
| D1 \$ | Net foreign inc | ome D \$ | | |
| Australian franking crec | lits from a New Zealand comp | any E \$ | | |
| | Transfers foreign fu | | | Number |
| | Gross payments w | here H\$ | | |
| Calculation of assessable con Assessable employer contri | tributions Gross distribu | ition IS | | Loss |
| R1 \$ | from partners | • | | |
| plus Assessable personal contril | outions | | | |
| R2 \$ | | ount K\$ | | |
| plus #*No-TFN-quoted contribu | | king redit L\$ | | Orde |
| (an amount must be included eve | *0 | | | Code |
| less Transfer of liability to life insu company or PST | Irance Assess | | | |
| R6 \$ | (R1 plu plus R3 less | s R2 K ⊅ | 35,000 | |
| Calculation of non-arm's lengt | | | | Code |
| *Net non-arm's length private compa | *Other inc | ome S \$ | | |
| plus *Net non-arm's length trust dis | stributions /*Assessable inc | | | |
| U2 \$ | status of | fund | | _ |
| plus *Net other non-arm's length | income Net non-al length inco (subject to 45% tax | ome 🖬 🖒 | | |
| U3 \$ | (Ú1 plus U2 plus | U3) | | |
| "This is a mandatory label. | GROSS INCC (Sum of labels A t | | 50,657 | Loss |
| *If an amount is entered at this label, | Exempt current pension inc | ome Y\$ | | |
| check the instructions to ensure the correct tax treatment has been applied. | TOTAL ASSESSABLE INCOME (W less Y) | \$ | 50,657 | Loss |

Page 4

Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

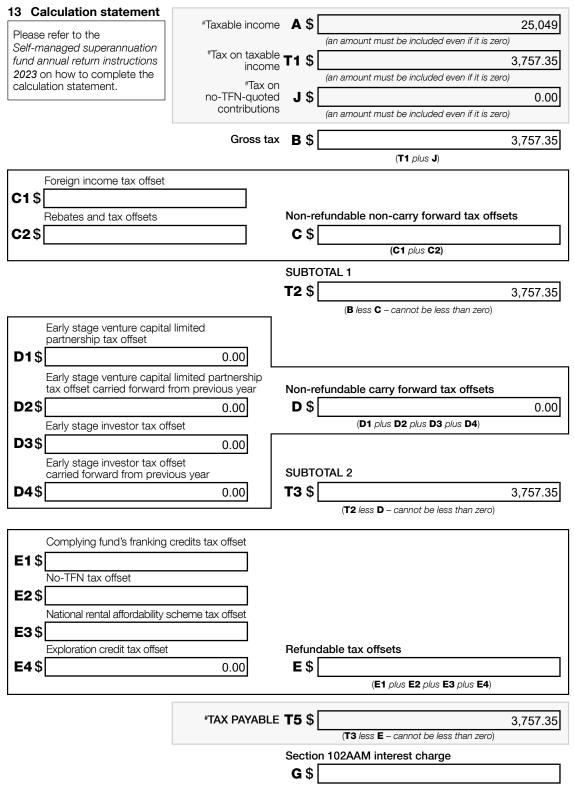
Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded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

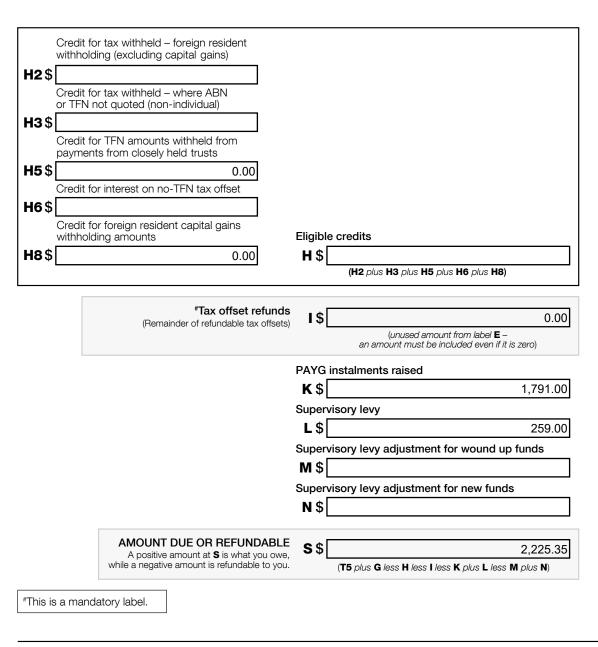


Section D: Income tax calculation statement

#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.

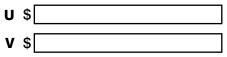




Section E: Losses

14 Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2023. Tax losses carried forward to later income years Net capital losses carried forward to later income years



| Section F: Member information | | | | | | |
|---|--|--|--|--|--|--|
| | | | | | | |
| Title: Mr Miss Ms Other Family name | | | | | | |
| Latto | | | | | | |
| First given name Other given | n names | | | | | |
| Paul Justin | Day Month Year | | | | | |
| Member's TFN See the Privacy note in the Declaration. Provided | Date of birth Provided | | | | | |
| | | | | | | |
| Contributions OPENING ACCOUNT BALANCE \$ | 122,044.04 | | | | | |
| Refer to instructions for completing these labels. | Proceeds from primary residence disposal | | | | | |
| Employer contributions | \$ Day Month Year | | | | | |
| А \$ Н | 1 Receipt date / / / | | | | | |
| ABN of principal employer | Assessable foreign superannuation fund amount | | | | | |
| A1 Personal contributions | Non approach foreign superannuation fund amount | | | | | |
| | Non-assessable foreign superannuation fund amount | | | | | |
| CGT small business retirement exemption | Transfer from reserve: assessable amount | | | | | |
| С\$К | \$ | | | | | |
| CGT small business 15-year exemption amount D L L | Transfer from reserve: non-assessable amount | | | | | |
| Personal injury election | ♥ Contributions from non-complying funds | | | | | |
| E \$ | and previously non-complying funds | | | | | |
| | \$ Any other contributions | | | | | |
| F \$ Other third party contributions | (including Super Co-contributions and Low Income Super Amounts) | | | | | |
| G \$ M | | | | | | |
| TOTAL CONTRIBUTIONS N | \$ 17,500.00 | | | | | |
| | (Sum of labels A to M) | | | | | |
| | Allocated earnings or losses | | | | | |
| Other transactions O | | | | | | |
| Accumulation phase account balance | Inward rollovers and transfers | | | | | |
| S1 \$ 174,245.96 | ♥ Outward rollovers and transfers | | | | | |
| Retirement phase account balance Q | | | | | | |
| S2 \$ 0.00 | Lump Sum payments Code | | | | | |
| R1 | \$ | | | | | |
| | Income stream payments Code | | | | | |
| S3 \$0.00 R2 | \$ | | | | | |
| 0 TRIS Count CLOSING ACCOUNT BALANCE S | \$ 174,245.96 (S1 plus S2 plus S3) | | | | | |
| Accumulation phase value X1 | \$ | | | | | |
| Retirement phase value X2 | \$ | | | | | |
| Outstanding limited recourse borrowing arrangement amount | \$ | | | | | |

I

| | | | | | Tax File N | umber | Provided | |
|---|------------------------------------|----------|------|---------------|-------------------------------------|------------|---------------|------|
| MEMBER 2 | | | | | | | | |
| | | | | | | | | |
| Title: Mr Mrs Miss Ms Oth | her | | | | | | | |
| Family name | | | | | | | | |
| First given name | Othe | ər giver | n na | ames | | | | |
| Sharyn Debra | | - 0 - | - | | | | | |
| Marchavia TEN | | | | | | Day | Month | Year |
| See the Privacy note in the Declaration. | ovided | | | | Date of birth | | Provided | |
| | | | | | | | | |
| Contributions OPENING ACCC | UNT BALANCE | \$ | | | | 108,353 | .55 | |
| | | • | | | | | | |
| Refer to instructions for completing the | nese labels. | ч | \$ | Proceeds fro | m primary reside | nce disp | osal | |
| Employer contributions | | п | φ | | Day Month | 1 | Year | |
| A \$ | | н | 11 | Receipt date | | | | |
| ABN of principal employer | | | | Assessable f | oreign superannu | ation fund | d amount | |
| A1 | | I | \$ | | | | | |
| Personal contributions | | | | Non-assessa | able foreign supe | rannuatic | n fund amount | |
| | 500.00 | J | \$ | | | | | |
| CGT small business retirement exe | emption | | | Transfer from | n reserve: assess | able amc | ount | |
| | | K | | | | | | |
| CGT small business 15-year exem | plion amount | | \$ | Transfer from | n reserve: non-as | sessable | amount | |
| Personal injury election | | - | | Contribution | s from non-comp | lvina fun | | |
| E \$ | | | | and previous | sly non-complying | g funds | 45 | |
| Spouse and child contributions | | Т | \$ | | | | | |
| F \$ | | | | Any other co | ntributions | ione | | |
| Other third party contributions | | | | and Low Inc | iper Co-contribut ome Super Amou | unts) | | |
| G \$ | | Μ | \$ | | | | | |
| | | | ¢ | | | 47 500 | | |
| TOTAL CC | ONTRIBUTIONS | > N | \$ | | of labels A to M) | 17,500 | .00 | |
| | | | _ | | rnings or losses | | | |
| Other transactions | | 0 | \$ | | 1111193 01 103363 | 32,589 | | |
| | | Ŭ | | Inward rollov | ers and transfers | | | |
| Accumulation phase account bala | nce | Р | \$ | | | | | |
| S1 \$ 158, | 442.77 | | | Outward roll | overs and transfe | rs | | |
| Retirement phase account balance – Non CDBIS | e | Q | \$ | | | | | |
| S2 \$ | 0.00 | | | Lump Sum p | payments | | Code | |
| Retirement phase account balance | | R1 | \$ | | | | | |
| – CDBIS | 5 | | | Income strea | am payments | | Code | |
| S3 \$ | 0.00 | R2 | \$ | | | | | |
| | | | | | | | | |
| 0 TRIS Count CLOSING ACCO | UNT BALANCE | S | \$ | | | 158,442 | .77 | |
| | | | | (S1) | plus S2 plus S3) | | | |
| Accumula | tion phase value | • X1 | \$ | | | | | |
| | | | | | | | | |
| | nent phase value | | Φ | L | | | | |
| Outstanding borrowing arrar | limited recourse agement amount | t Y | \$ | | | | | |
| 5 | - | | | | | | | |

| 15 | Section H: Assets and liabilities | | | | | |
|-----|---|------------------------------------|--------------|---------|---|--|
| 15a | Australian managed investments | Listed trusts | A \$[| | | |
| | | Unlisted trusts | в\$[| | | |
| | | Insurance policy | c \$[| | | |
| | Ot | her managed investments | D \$[| | | |
| 15b | Australian direct investments | Cash and term deposits | E \$[| 15,237 | | |
| | Limited recourse borrowing arrangement Australian residential real property | s Debt securities | F \$[| | | |
| | J1 \$ 480,00 | Loans | G \$[| | | |
| | Australian non-residential real property | Listed shares | н\$[| | | |
| | J2 \$ Overseas real property | Unlisted shares | I\$ | | | |
| | J3 \$ | Limited recourse | • • [| | ٦ | |
| | Australian shares | borrowing arrangements | J \$ | 480,000 | | |
| | J4 \$ | Non-residential real property | K \$[| | | |
| | Overseas shares J5 \$ | Residential | L \$ | | | |
| | Other | real property Collectables and | м \$[| | | |
| | J6 \$ | personal use assets | · L | | | |
| | Property count | Other assets | o \$[| | | |
| | J7 1 | | | | | |
| 15c | Other investments | Crypto-Currency | N \$[| | | |
| 15d | Overseas direct investments | Overseas shares | Р\$[| | | |
| | Overseas no | on-residential real property | Q \$[| | | |
| | Overse | as residential real property | R \$[| | | |
| | Overs | eas managed investments | s \$[| | | |
| | | Other overseas assets | т\$[| | | |
| | | ND OVERSEAS ASSETS bels A to T) | U \$[| 495,237 | | |
| 15e | In-house assets Did the fund have a loan to, lease to or investment in, related parties (known as in-house assets) at the end of the income year? | | \$[| | | |

| | | | | Tax File | Number | Provided | |
|-----|--|------------|-------------------|----------|--------|----------|---|
| 15f | Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution? Did the members or related parties of the fund use personal guarantees or other security for the LRBA? | | Yes X Yes X | | | | |
| 16 | LIABILITIES Borrowings for limited recourse borrowing arrangements V1 \$ 139,278 Permissible temporary borrowings V2 \$ | | | | | | |
| | Other borrowings V3 \$ | Borro | wings | \$ | | 139,278 | |
| | Total member clos (total of all CLOSING ACCOUNT BALANCEs fro | | nd G) N | | | 332,688 | _ |
| | | Other liak | oilities Y | \$ | | 23,271 | |
| | | TOTAL LIAB | ilities Z | \$ | | 495,237 | |

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 2022–23 income year, write 2023). | Α |
|--|-----|
| If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the <i>Family trust election, revocation or variation</i> 2023. | в |
| 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 <i>Interposed entity election or revocation 2023</i> for each election. | c |
| If revoking an interposed entity election, print R , and complete and attach the <i>Interposed entity election or revocation 2023</i> . | D 🗌 |

٦

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 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.

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 trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received a copy of the audit report and are 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 | |
|--|--|
| | Day Month Year |
| | Date 15 / 08 / 2023 |
| Preferred trustee or director contact details: | |
| Title: Mr Mrs Miss Ms Other | |
| Family name | |
| Latto | |
| First given name Other given names | |
| Paul Justin | |
| Phone number 0882719555 | |
| Email address | |
| | |
| Non-individual trustee name (if applicable) | |
| Ottal Management Pty Ltd | |
| ABN of non-individual trustee | |
| | |
| Time taken to prepare and complete this annual return | Hrs |
| The Commissioner of Taxation, as Registrar of the Australian Business Register, may use provide on this annual return to maintain the integrity of the register. For further information | |
| TAX AGENT'S DECLARATION: I declare that the <i>Self-managed superannuation fund annual return</i> 2023 has been prepare provided by the trustees, that the trustees have given me a declaration stating that the info correct, and that the trustees have authorised me to lodge this annual return. Tax agent's signature | |
| | Day Marthe Mart |
| | Day Month Year Date 15 / 08 / 2023 |
| Tax agen <u>t's</u> con <u>tac</u> t det <u>ail</u> s | |
| Title: Mr Miss Ms Other | |
| Family name | |
| Lounder | |
| First given name Other given names | |
| Phillip | |
| Tax agent's practice | |
| PDK Financial Synergy Pty Ltd | |
| Tax agent's phone number Reference number | Tax agent number |
| 08 82719555 LATTO | 25452589 |
| | |

100017996BP

2023

Losses schedule

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2023 tax return. Superannuation funds should complete and attach this schedule to their 2023 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 2023*, available on our website **ato.gov.au** for instructions on how to complete this schedule. Tax file number (TFN) Provided Name of entity The Latto Superannuation Fund

Australian business number

58457135638

Part A - Losses carried forward to the 2023-24 income year - excludes film losses

- 1 Tax losses carried forward to later income years

 Year of loss

 G022-23
 B

 2021-G
 C

 2020-21
 D

 2019-20
 E

 2018-19
 F

 2017-18 and earlier income years
 G

 Total
 U
- 2 Net capital losses carried forward to later income years

| Year of loss | |
|--|--|
| 2022–23 | н |
| 2021–22 | I |
| 2020–21 | J |
| 2019–20 | К |
| 2018–19 | L |
| 2017–18 and earlier income years | Μ |
| Total | v |
| Transfer the amount at V to the Net capital losses carried for | orward to later income years label on your tax return. |

...

| | | | Tax File Number Provided | | | | |
|--|---|------|--|--|--|--|--|
| Part B – Ownership and I | business continuity | / te | est – company and listed widely held trust only | | | | |
| Complete item 3 of Part B if a loss is being | carried forward to later income ye | ears | 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 | | | | | | | |
| against a net capital gain or, in the case of c | companies, losses have not been | tran | isterred in or out. | | | | |
| 1 Whether continuity of majority | Year of loss | | | | | | |
| ownership test passed | 2022–23 | A | Yes No | | | | |
| Note: If the entity has deducted, applied, transferred in or transferred out (as applicable) in the 2022–23 income year a loss incurred in | 2021–22 | В | Yes No | | | | |
| 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 | 2020–21 | С | Yes No | | | | |
| respect of that loss. | 2019–20 | D | Yes No | | | | |
| | 2018–19 | Е | Yes No | | | | |
| | 2017–18 and earlier income years | F | Yes No | | | | |
| | | | | | | | |
| 2 Amount of losses deducted/applied f business continuity test is satisfied – | | orit | y ownership test is not passed but the | | | | |
| | Tax losses | G | | | | | |
| | Net capital losses | н | | | | | |
| | | | | | | | |
| 3 Losses carried forward for which the applied in later years – excludes film loss | | t be | satisfied before they can be deducted/ | | | | |
| | Tax losses | I | | | | | |
| | Net capital losses | J | | | | | |
| | • | | | | | | |
| 4 Do current year loss provisions apply Is the company required to calculate its tax | able income or tax loss for | | | | | | |
| the year under Subdivision 165-B or its net ca for the year under Subdivision 165-CB of the | | K | | | | | |
| 1997 (ITAA 1997)? | | | | | | | |
| | | | | | | | |
| Part C – Unrealised losses - a | company only | | | | | | |
| Note: These questions relate to the operation of | f Subdivision 165-CC of ITAA 1997. | | | | | | |
| Has a changeover time occurred in relation to after 1.00pm by legal time in the Australian Ca 11 November 1999? | | L | Yes No | | | | |
| If you printed X in the No box at L , do not comp | blete M , N or O . | | | | | | |
| At the changeover time did the company satis net asset value test under section 152-15 of I | | М | Yes No | | | | |
| If you printed X in the No box at M , has the co it had an unrealised net loss at the changeove | | N | Yes No | | | | |
| If you printed X in the Yes box at N , what was unrealised net loss calculated under section 1 | | 0 | | | | | |

| | Та | x File Number | Provided |
|--|------|-----------------------|-------------------------------------|
| Part D – Life insurance companies | | | |
| Complying superannuation class tax losses carried forward to later income years | Ρ | | |
| Complying superannuation net capital losses carried forward to later income years | Q | | |
| Part E – Controlled foreign company losses | | | |
| Current year CFC losses | м | | |
| | | | |
| CFC losses deducted | Ν | | |
| CFC losses carried forward | 0 | | |
| Part F – Tax losses reconciliation statement | | | |
| Balance of tax losses brought forward from the prior income year | Α | | |
| ADD Uplift of tax losses of designated infrastructure project entities | в | | |
| SUBTRACT Net forgiven amount of debt | _ | | |
| | _ | | |
| ADD Tax loss incurred (if any) during current year | D | | |
| ADD Tax loss amount from conversion of excess franking offsets | Ε | | |
| 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 for | ware | d to later income yea | rs label on your tax return. |

| Tax File Number Provided |
|---|
| f the schedule is not lodged with the income tax return you are required to sign and date the schedule. |
| mportant 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

| Paul Justin Latto | 0882719555 |
|-------------------|--|
| Contact person | Daytime contact number (include area code) |
| | Date / / |
| | DayMonthYear |

Capital gains tax (CGT) schedule

2023

When completing this form

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 2023 available on our website at ato.gov.au for instructions on how to complete this schedule.

Tax file number (TFN) Provided

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) 58457135638

Taxpayer's name

The Latto Superannuation Fund

1 Current year capital gains and capital losses

| Shares in companies | Capital gain | Capital loss |
|---|---------------|---|
| listed on an Australian securities exchange | A \$ | К\$ |
| 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 | E \$ | O \$ |
| Other real estate | F \$ | Р\$ |
| Amount of capital gains from a trust (including a managed fund) | G \$ | |
| Collectables | Н\$ | Q \$ |
| Other CGT assets and any other CGT events | I \$ | R \$ |
| Amount of capital gain previously deferred under transitional CGT relief for superannuation funds | S \$ 0 | 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 \$ | |

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| | | Tax File Number | Provided |
|---|---|--|--------------------------|
| 2 | Capital losses | | |
| | - Total current year capital losses | A \$ | |
| | | | |
| | 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 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 | в\$ | |
| | | Add amounts at A and B to label V - Net capital la to later income years or | osses carried forward |
| 4 | CGT discount | | |
| | Total CGT discount applied | A \$ | |
| 5 | CGT concessions for small business | | |
| | Small business active asset reduction | A \$ | |
| | Small business retirement exemption | в\$ | |
| | Small business rollover | C \$ | |
| | Total small business concessions applied | D \$ | |
| | | • | |
| 6 | Net capital gain | | |
| | Net capital gain | A \$ | |
| | | 1J less 2E less 4A less 5 zero). Transfer the amour capital gain on your tax | nt at A to label A – Net |

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| | Tax File | e Number | Provided | |
|---|---|-----------------|--------------------------|-----|
| 7 | 7 Earnout arrangements | | | _ |
| | Are you a party to an earnout arrangement? A Yes, as a buyer Yes, as (Print \mathcal{X} in the appropriate box.) | a seller | No | |
| | If you are a party to more than one earnout arrangement, copy and attach a separat details requested here for each additional earnout arrangement. | e sheet to this | s schedule providing the | ; |
| | How many years does the earnout arrangement run for? | | | |
| | What year of that arrangement are you in? | | | |
| | If you are the seller, what is the total estimated capital proceeds from the earnout arrangement? | | | |
| | Amount of any capital gain or loss you made under E \$ | | | SS |
| | Request for amendment If you received or provided a financial benefit under a look-through earnout right creat wish to seek an amendment to that earlier income year, complete the following: | ated in an earl | lier income year and you | r |
| | Income year earnout right created F |] | | |
| | Amended net capital gain or capital losses carried forward G | | | OSS |
| 8 | 8 Other CGT information required (if applicable) | | C | DDE |
| | 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 \$ | | | |

Provided

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 | |
| Contact name | Date Day Month Year / |
| Paul Justin Latto | |
| Daytime contact number (include area code) | |
| 0882719555 | |

Electronic Lodgment Declaration (SMSF)

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 Fund | Year |
|-----------------|-------------------------------|------|
| Provided | The Latto Superannuation Fund | 2023 |

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 the information provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct; and
 - I authorise the agent to lodge this tax return.

| Signature of Partner, Trustee, or Director | Date | / | 1 |
|---|------|---|---|
| | | | |

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.

| 5WWcibhiBUaY | Thë Latto Superannuation Fund | | |
|--------------------------|-------------------------------|------------------|-------|
| Account Number | 035202 121425 | Client Reference | LATTO |
| | | | |

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

| Signature | Date | / | 1 | |
|-----------|------|---|---|--|
| | | | | |

Tax Agent's 8 YWUfUfjcb

I declare that:

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- 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 | / | / |
|--------------------------------|-----------------|---|---------------------|----------|---|
| Contact name | Phillip Lounder | | Client Reference | LATTO | |
| Agent's Phone Num | ber 08 82719555 | н | UI `5 [YbhBi a VYf | 25452589 | |