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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.

| | 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). | Postal Austra GPO I [insert of you For ex Austra GPO I | in ALL applic address for a alian Taxatio 3ox 9845 | annual returns: on Office and postcode y] on Office | |
|---------|---|---|---|---|-------------------|
| _ Se | ection A: Fund information | | | | |
| | | | | processing, write the f | und's TFN at |
| 1 | Tax file number (TFN) The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual returns. | | 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 Audi Title: Famil | tor's Mr | | Other | | | | | |
|-------------------------------------|---|--|-------------------|--------------|--------------------|----------------|-------------------|--------------|
| First | given | name | | Other giver | n names | | | |
| SMS | SF Au | uditor Number | Auditor's phone r | umber | | | | |
| Post | al ad | ddress | | | | | | |
| Subu | rb/tov | wn | | | | | State/territory | Postcode |
| Date | aud | lit was completed A | Month / | Year | | | | |
| Was | Part | A of the audit report qualified | l? B | No | Yes | | | |
| Was | Part | : B of the audit report qualified | i? C | No | Yes | | | |
| | | of the audit report was qualified reported issues been rectified? | | No | Yes | | | |
| 7 | | ctronic funds transfer (E need your self-managed super | | nstitution (| details to pay any | super payments | and tax refunds o | wing to you. |
| | Α | Fund's financial instituti | ion account de | etails | | | | |
| | This account is used for super contributions and rollovers. Do not provide a tax agent account here. Fund BSB number Fund account number Fund account name | | | | | | | |
| | | I would like my tax refunds m | nade to this acco | unt. | Go to C. | | | |
| | В | Financial institution acc This account is used for tax in BSB number Account name | | provide a | | | | |

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 fund pay retirement phase superannuation income stream benefits to one or more members in the income year? | | | | | | | | | | |
| | To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under the law. Record exempt current pension income at Label A. | | | | | | | | | | |
| | No | Go to Se | ction B: Income. | | | | | | | | |
| | Yes Exempt current pension income amount A\$ | | | | | | | | | | |
| | | Which method did you use to calculate your exempt current pension income? | | | | | | | | | |
| | | | Segregated assets m | ethod B | | | | | | | |
| | Unsegregated assets method C Was an actuarial certificate 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** Loss

#This is a mandatory (TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS label.

TOTAL SMSF EXPENSES Z\$

Y\$

(N plus Y)

TOTAL NON-DEDUCTIBLE EXPENSES

(Total A2 to L2)

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 income T1\$

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

#Tax on no-TFN-quoted contributions

(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 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 **o** \$ 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 R1 \$ **S2** \$ Retirement phase account balance Code - CDBIS Income stream R2 \$ **S3**\$ payments

Accumulation phase value X1 \$

CLOSING ACCOUNT BALANCE \$\$

Retirement phase value X2 \$

(**S1** plus **S2** plus **S3**)

Outstanding limited recourse borrowing arrangement amount

TRIS Count

MEMBER 2 Title: Mr Mrs Miss Ms Other Family name First given name Other given names 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 Α1 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 Т Spouse and child contributions Any other contributions \$ (including Super Co-contributions and Low Income Super Amounts) Other third party contributions G \$ M \$ TOTAL CONTRIBUTIONS N \$ (Sum of labels A to M) Loss Allocated earnings Other transactions 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 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 **Y** \$

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?

| 15f | Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution? | A NO Tes |
|------|--|---|
| | Did the members or related parties of the fund use personal guarantees or other security for the LRBA? | Yes |
| 16 | LIABILITIES | |
| | Borrowings for limited recourse borrowing arrangements | |
| | V1 \$ | |
| | Permissible temporary borrowings | |
| | V2\$ | |
| | Other borrowings | |
| | V3 \$ | Borrowings V \$ |
| | Total member clos (total of all CLOSING ACCOUNT BALANCE s fr | osing account balances from 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 | FA) Total TOFA gains H \$ |
| | | · · |
| | | Total TOFA losses \$ |
| | | |
| Se | ction J: Other information | |
| Fam | ily trust election status | |
| | f the trust or fund has made, or is making, a fam | mily trust election, write the four-digit income year xample, for the 2020–21 income year, write 2021). |
| | If revoking or varying a family trust and complete and attach the <i>I</i> | t election, print R for revoke or print V for variation, Family trust election, revocation or variation 2021. |
| Inte | posed entity election status | |
| | or fund is making one or more elect | , write the earliest income year specified. If the trust ctions this year, write the earliest income year being entity election or revocation 2021 for each election. |
| | | an interposed entity election, print R , and complete to the <i>Interposed entity election or revocation 2021</i> . |

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.

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 nublic officer's sign

| Authorised trus | stees, air | ector | s or public | onicers s | gnature | | | | | |
|-------------------------------|--|------------------|--------------------------|-------------|---|------|--------|---------|--------|----------|
| | | | | | | Date | Day | Mont | h / | Year |
| Preferred tru | ıstee oı | r dire | ctor cor | ntact deta | ails: | | | | | |
| Title: Mr Family name | Mrs | Miss | Ms | Other | | | | | | |
| First given name | | | | | Other given names | | | | | |
| Phone number Email address | | | | | | | | | | |
| Non-individual | trustee n | ame (| if applicab | ole) | | | | | | |
| ABN of non-inc | dividual tr | ustee r | | | | | | 1 | | |
| | | | Time take | n to prepai | re and complete this annual return | | Hrs | | | |
| | | | | | the Australian Business Register, may egrity of the register. For further inform | | | | | hich you |
| provided by the | ne <i>Self-ma</i> e trustees at the trus | anage s, that | ed superar the truste | es have giv | nd annual return 2021 has been pre ren me a declaration stating that the to lodge this annual return. | | | | | |
| | | | | | | Date | Day | Mont | h / | Year |
| Tax agent's | contact | deta | ails | | | | | | | |
| Title: Mr Family name | Mrs | Miss | Ms | Other | | | | | | |
| First given name | | | | | Other given names | | | | | |
| Tax agent's pra | ictice | | | | | | | | | |
| Tax agent's pho | one numb | oer | | | Reference number | | Tax ac | ent num | ber | |

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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.

 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.

| Year of loss | | | |
|--------------------------------|---|-----|----|
| 2020–21 | A | Yes | No |
| 2019–20 | В | Yes | No |
| 2018–19 | С | Yes | No |
| 2017–18 | D | Yes | No |
| 2016–17 | Ε | Yes | No |
| 15–16 and earlier income years | F | Yes | 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

20

Tax losses **G**

Net capital losses H

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 J

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* 1997 (ITAA 1997)?

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?

M Yes No

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

N Yes No

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

0

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 | | | | | | |
|----------------|-------|------------|--------|------------|---------|------|
| | | | Day | Month | | Year |
| | | Date | , | / | / | |
| Contact person | Dayti | me contact | number | (include a | area co | de) |

Capital gains tax (CGT) schedule

202%

| When | comp | letina | thie | form |
|--------|--------|--------|------|--------|
| wileii | COILID | ıeuna | 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. |

| 1 | Earnout arrangements | | |
|---|---|--|------------|
| | Are you a party to an earnout arrangement? \mathbf{A} Yes, as a buyer (Print $\overline{\mathcal{X}}$ 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 pro | viding 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 | , | d 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 | В\$ | |
| | Capital gains disregarded as a result of a scrip for scrip rollover | C \$ | |
| | Capital gains disregarded as a result of an inter-company asset rollover | D \$ | |
| | Capital gains disregarded by a demerging entity | E \$ | |

Taxpayer's declaration



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

Important

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

Privacy

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

| I declare that the information on this form is true and correct. | | | | | |
|--|-------------|-------|---|------|--|
| Signature | | | | | |
| | Date Day | Montl | 1 | Year | |
| Contact name | | | | | |

Daytime contact number (include area code)

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 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 Date Director **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.

| 5 WWordi bhiBUa Y ^{™™™} | | | | | |
|---|------------------------------|------|---|---|--|
| | | | | | |
| authorise the refund to be deposited direct | tly to the specified account | 1 | | | |
| Signature | | Date | / | 1 | |

Tax Agent's 8 YWUfUijcb

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 | e this tax return, including any appli | cable sch | iedules. | |
|--|--|-----------|----------|--|
| Agent's signature | Date | 1 | 1 | |
| Contact name | Client Reference | | | |
| Agent's Phone Number | HU '5 [YbhBi a VYf | | | |