

Australian Taxation Office Capital gains tax cap election

WHEN COMPLETING THIS FORM

You can complete this form electronically or with a pen. If you choose to use a pen:

Print clearly in BLOCK LETTERS, using a black pen.

₦ Place X in ALL relevant boxes.

You must give your signed and dated election to your super fund either with your contribution or before your contribution is made. It's not valid if the contribution has already been made.

	Fund's name			
	Australian business number (ABN) 1 7 8 9 0 8 9 8 6 7 8 Member account number H O W E A F			
6	ection B: Your details			
	Tax file number (TFN)			
	1 4 7 9 1 6 4 1 0			
	I I I I I I I I I I I I I I I I I I I			
	The ATO does not collect the information provided on this form. This form is to assist you in providing details to your super fund. Your super fund is authorised to request your personal details, including your TFN, under the Superannuation Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing this form to.			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN, and your super fund depart to be sold			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN, under the Superannuation do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing Full name			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN, under the Superannuation do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing this form to. Full name Title: Mr Mrs Miss Ms Other			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing this form to. Full name Title: Mr Mrs Miss Ms Other HOWELL First given name Other given names			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing this form to. Full name Title: Mr Mrs Miss Ms Other HOWELL First given pages			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing. Full name Title: Mr Mrs Miss Ms Other Family name HOWELL First given name Other given names			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing this form to. Full name Title: Mr Mrs Miss Ms Other HOWELL First given name Other given names FRANCES			
新 · 新 · · · · · · · · · · · · · · · · ·	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN, under the Superannuation do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing this form to. Full name Title: Mr Mrs Miss Ms Other Family name HOWELL First given name ANGELA Address 83 LAYCOCK ROAD			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing this form to. Full name Title: Mr Mrs Miss Ms Other Family name HOWELL First given name Other given names ANGELA Address 83 LAYCOCK ROAD			
	Industry (Supervision) Act 1993 (ie, s299E, 299F and 299G). It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution covered by this election. For more information about your privacy please contact the entity you are providing this form to. Full name Title: Mr Mrs Miss Ms Other Family name HOWELL First given name Other given names ANGELA Address 83 LAYCOCK ROAD			

Se	ection C: Payer details		
9	Name		
	ACRAH PTY LTD		
	ATF THE HOWELL FAMILY TRUST		
10	ABN		
11	Contact name		
	Title: Mr / Mrs Miss Ms Other Family name		
	HOWELL		
	First given name Other given names		
	JOHN		
	Contact phone number (include area code) 0 4 1 9 1 6 6 6 0 2 ection D: Election		
and the same			
	This election is only valid for personal 'after-tax' contributions. If a payer is not acting for you and on your behalf the contribution may not be a personal contribution. For example, if your employer makes the contribution under an obligation to contribute for you it may be treated as an employer contribution and be counted towards the concessional contributions cap.		
13	Election and amount		
	Place an X in the appropriate box to show the CGT concession(s) that applies to you. In each case provide the amount you choose to exclude from your non-concessional contributions cap because of your entitlement to the CGT concession.		
	Small business retirement exemption amount Provide amount \$,2, 3 9 8 • 4 0		
	Small business 15-year exemption amount Provide amount \$,,		
	There are limits on the amounts you can claim. If you exceed them your election will not be effective. For details of these limits visit our website at ato.gov.au and refer to CGT cap election.		
14	Is this election for a further contribution of a financial benefit from a look-through earnout right from an earlier CGT event? (See instructions)		
	Yes No ✓		
	Financial benefits provided under look-through earnout rights must generally be made within 5 years of the end of the income year in which the CGT event occurred.		

Section E: Declaration



Providing false or misleading information in this election may result in the ATO imposing an administrative penalty.

I declare, that:

- the personal contributions for which this election is to apply will be made by me or on my behalf
- I am eligible for one or both of the following CGT concessions
 - the small business 15-year exemption
 - the small business retirement exemption
- I have met all the requirements of section 292-100 of the Income Tax Assessment Act 1997 to elect to have the contributions excluded from the non-concessional contributions cap.

If the personal contribution for which this election is to apply is a financial benefit from a look-through earnout right and I would otherwise be ineligible to make this personal contribution into superannuation, then:

- m I was under 65 years old when the underlying CGT event happened, or
- 🛚 I was between 65 and 74 years old and gainfully employed for at least 40 hours in a period of not more than 30 consecutive days during the financial year in which the CGT event happened, and
- the amount of the contribution does not exceed my CGT cap amount.

Name (Print in BLOCK LETTERS)	
ANGELA FRANCES HOWELL	
Signature Ald well	Date Day Month Yes 1 0 / 0 9 / 2 0 1 9