# Self-managed superannuation fund annual return 2020

<ul> <li>Who should complete this annual return?</li> <li>Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the Fund income tax return 2020 (NAT 71287).</li> <li>The Self-managed superannuation fund annual return instructions 2020 (NAT 71606) (the instructions) can assist you to complete this annual return.</li> <li>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).</li> </ul>		To complete this annual return  ■ Print clearly, using a BLACK pen only.  ■ Use BLOCK LETTERS and print one character per box.  SMITHES IN ALL applicable boxes.  ■ Place X in ALL applicable boxes.  Postal address for annual returns:  Australian Taxation Office GPO Box 9845 [insert the name and postcode of your capital city]  For example;  Australian Taxation Office GPO Box 9845 SYDNEY NSW 2001						
	ection A: <b>Fund information</b>			•	ocessing, write the f	und's TFN at		
1	Tax file number (TFN) the top of pages 3, 5, 7 and 9.							
	The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual retu	e not c ırn. Se	bliged to the P	to quote your T rivacy note in tl	FN but not quoting ne Declaration.	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 2020 return?	A	No	Yes				
	Is this the first required return for a newly registered SMSF?	В	No	Yes				

#### 6 SMSF auditor

Auditor's name

Title: Mr Mrs Miss Ms Other

Family name

First given name Other given names

SMSF Auditor Number Auditor's phone number

Postal address

Suburb/town State/territory Postcode

Date audit was completed f A / / / /

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?

#### 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 Fund account number

Fund account name

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

Status of SMSF Australian superannuation fund A No Yes Fund benefit structure Code Does the fund trust deed allow acceptance of C No Yes the Government's Super Co-contribution and Low Income Super Amounts? Was the fund wound up during the income year? Have all tax lodgment Month and payment obligations been met? If yes, provide the date on Yes which the fund was wound up 10 Exempt 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 Section B: Income. Exempt current pension income amount A\$ Yes 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. Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. Go to Section C: Deductions and non-deductible expenses. (Do **not** complete Section B: Income.) No If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.

### 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.

11 Income If the total capital loss or total capital gain is greater than \$10,000 or you elected to use the transitional CGT relief in Did you have a capital gains tax G No 2017 and the deferred notional gain has been realised, Yes (CGT) event during the year? complete and attach a Capital gains tax (CGT) schedule 2020. Have you applied an M No Yes exemption or rollover? Net capital gain A\$ Gross rent and other leasing and hiring income **B** \$ Gross interest **C** \$ Forestry managed investment **X** \$ scheme income Gross foreign income Loss **D1**\$ Net foreign income **D** \$ Australian franking credits from a New Zealand company Number Transfers from foreign funds Gross payments where ABN not quoted Loss Calculation of assessable contributions Gross distribution Assessable employer contributions from partnerships R1 \$ Unfranked dividend J \$ amount plus Assessable personal contributions \*Franked dividend **K** \$ **R2** \$ amount \*\*No-TFN-quoted contributions plus \*Dividend franking L\$ 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 U2 \$ Net non-arm's plus \*Net other non-arm's length income length income (subject to 45% tax rate) (**U1** plus **U2** plus **U3**) **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 V \$ INCOME (W less Y) tax treatment has been applied.

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).

	DEDUCTIONS	NON-DEDUCTIBLE EXPENSES
Interest expenses within Australia	A1 \$	A2 \$
Interest expenses overseas	B1 \$	B2 \$
experiature	<b>Β</b> Ι ψ	D2 \$
Decline in value of depreciating assets	E1 \$	E2 \$
Insurance premiums – members		F2 \$
SMSF auditor fee	H1 \$	H2 \$
Investment expenses	I1 \$	12 \$
Management and administration expenses		<b>J2</b> \$
Forestry managed investment scheme expense	U1 \$	U2 \$
Other amounts	L1 \$	L2\$
Tax losses deducted	M1 \$	

Loss

TOTAL DEDUCTIONS N \$ (Total A1 to M1)

**\*TAXABLE INCOME OR LOSS** 

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

label.

TOTAL NON-DEDUCTIBLE EXPENSES **Y**\$ (Total A2 to L2)

**TOTAL SMSF EXPENSES Z**\$ (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. 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 2020 on how to complete the calculation statement. #Taxable income A\$

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

#Tax on taxable income

#Tax on taxable income

#Tax on no-TFN-quoted contributions

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

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

Gross tax **B** \$

(T1 plus J)

Foreign income tax offset

C1 \$

Rebates and tax offsets

Non-refundable non-carry forward tax offsets

C2 \$

(C1 plus C2)

SUBTOTAL 1

T2 \$

(B less C - cannot be less than zero)

Early stage venture capital limited partnership tax offset

**D1**\$

Early stage venture capital limited partnership tax offset carried forward from previous year

**D2**\$

Early stage investor tax offset

**D3**\$

Early stage investor tax offset carried forward from previous year

**D4**\$

Non-refundable carry forward tax offsets

**D**\$

(D1 plus D2 plus D3 plus D4)

SUBTOTAL 2

T3 \$

(T2 less D - cannot be less than zero)

Complying fund's franking credits tax offset

E1\$

No-TFN tax offset

**E2**\$

National rental affordability scheme tax offset

**E3**\$

Exploration credit tax offset Refundable tax offsets

**E4**\$

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**\$

1\$

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

\*Tax offset refunds

(Remainder of refundable tax offsets)

(unused amount from label **E** – an amount must be included even if it is zero)

PAYG instalments raised

**K**\$

Supervisory levy

**L**\$

Supervisory levy adjustment for wound up funds

**M**\$

Supervisory levy adjustment for new funds

**N**\$

AMOUNT DUE OR REFUNDABLE

**S**\$

A positive amount at  ${\bf S}$  is what you owe, while a negative amount is refundable to you.

(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

1+ L0330

If total loss is greater than \$100,000, complete and attach a Losses schedule 2020.

Tax losses carried forward to later income years

U \$

Net capital losses carried forward to later income years

**V** \$

Section G: Supplementa	ary member	informatio	
	other		Account status Code
First given name	Other giver	n names	
<b>Member's TFN</b> See the Privacy note in the Declaration.	Date of birth  Day Month  / /	Year	If deceased, date of death  Day Month Year  /
Contributions	G ACCOUNT BALANCE	≡ \$	
Refer to instructions for completing	these labels.	Proceeds from p	rimary residence disposal
Employer contributions  A \$ ABN of principal employer  A1 Personal contributions  B \$ CGT small business retirement exit  C \$ CGT small business 15-year exem  D \$ Personal injury election  E \$ Spouse and child contributions  F \$ Other third party contributions  G \$	nption amount	Receipt date  H1  Assessable foreig  I \$  Non-assessable  J  Transfer from res  K \$  Transfer from res  L \$  Contributions from and previously not  T \$  Any other contributions Super Low Income Sup  M \$	Co-contributions and
Other transactions	Allocated earning		Loss
Accumulation phase account bala	or losse Inwar rollovers an transfer Outwar	rd id <b>P\$</b>	
Retirement phase account balanc - Non CDBIS \$2 \$	e rollovers an transfel Lump Sun payment:	id Q\$ rs	Code
Retirement phase account balanc – CDBIS <b>\$3</b> \$	Income	R2 \$	Code
TRIS Count CLOSIN	G ACCOUNT BALANG	- •	(\$1 plus \$2 plus \$3)

Accumulation phase value X1 \$

Retirement phase value X2 \$

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

MEMBER 6  Title: Mr Mrs Miss Ms Other	Code Account status
Family name	7.000um status
First given name	Other given names
Member's TFN See the Privacy note in the Declaration.  Date of bir Day	th If deceased, date of death  Month Year Day Month Year  / / /
Contributions OPENING ACCOUNT E	BALANCE \$
Refer to instructions for completing these labels.	Proceeds from primary residence disposal  H \$
Employer contributions  A \$	Receipt date Day Month Year  H1
ABN of principal employer  A1  Personal contributions	Assessable foreign superannuation fund amount   S  Assessable foreign superannuation fund amount
B \$ CGT small business retirement exemption	Non-assessable foreign superannuation fund amount  J \$  Transfer from reserve: assessable amount
C \$ CGT small business 15-year exemption amount D \$	<ul><li>K \$</li><li>Transfer from reserve: non-assessable amount</li><li>L \$</li></ul>
Personal injury election  E \$	Contributions from non-complying funds and previously non-complying funds  T \$
Spouse and child contributions  F \$ Other third party contributions  G \$	Any other contributions (including Super Co-contributions and Low Income Super Amounts)  M \$
TOTAL CONTRIBUTIONS N	\$ (Sum of labels <b>A</b> to <b>M</b> )
Other transactions Allocated	d earnings or losses • \$
Accumulation phase account balance roll \$1 \$	Inward overs and transfers
– Non CDBİS	Outward overs and Q \$ transfers Code
Retirement phase account balance  – CDBIS	Income stream payments  R1 \$  Code  Code
TRIS Count CLOSING ACCOUNT	BALANCE <b>S</b> \$ (S1 plus S2 plus S3)
Accumulation pl	nase value <b>X1</b> \$

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\$ Australian non-residential real property Listed shares **H** \$ **J2**\$ Unlisted shares | \$ Overseas real property **J3**\$ Australian shares Limited recourse borrowing arrangements ${f J}$ \$ **J4**\$ Overseas shares Non-residential **J5**\$ real property Residential Other real property **J6**\$ Collectables and personal use assets **M** \$ Property count **J7** Other assets **O** \$ 15c Other investments Crypto-Currency N \$ 15d Overseas direct investments Overseas shares **P**\$ Overseas non-residential real property Q \$ Overseas residential real property **R**\$ Overseas managed investments \$\$ 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 \$ 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?

No Yes

Did the members or related parties of the fund use personal guarantees or other security for the LRBA?

No Yes

#### 16 LIABILITIES

Borrowings for limited recourse borrowing arrangements

V1 \$

Permissible temporary borrowings

**V2**\$

Other borrowings

**V3**\$

Borrowings V \$

Total member closing account balances (total of all **CLOSING ACCOUNT BALANCE**s from Sections F and G) **W** \$

**x** \$

Reserve accounts X S

Other liabilities Y \$

TOTAL LIABILITIES **Z** \$

### 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 2019-20 income year, write **2020**).

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* **2020**.

#### 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 *Interposed entity election or revocation 2020* for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation* **2020**.

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Section	ĸ.	Ioroti	nne
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Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.

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 returecords. I have received a copy of the audit report and are aware of any matters return, including any attached schedules and additional documentation is true a	s raised therein. The info	
Authorised trustee's, director's or public officer's signature		
	Date Day	Month Year
Preferred trustee or director contact details:		
Title: Mr Mrs Miss Ms Other Family name		
First given name Other given names		
Phone number Email address		
Non-individual trustee name (if applicable)		
ABN of non-individual trustee		1
Time taken to prepare and complete this annual re	eturn <b>Hrs</b>	
The Commissioner of Taxation, as Registrar of the Australian Business Register provide on this annual return to maintain the integrity of the register. For further		
TAX AGENT'S DECLARATION:  I declare that the Self-managed superannuation fund annual return 2020 has bee provided by the trustees, that the trustees have given me a declaration stating the and correct, and that the trustees have authorised me to lodge this annual return Tax agent's signature	nat the information provid	
Tax tags it to organization	Date	Month Year
Tax agent's contact details		. ,
Title: Mr Mrs Miss Ms Other Family name		
First given name Other given names		
Tax agent's practice		
Tax agent's phone number Reference number	Tax aç	gent number

Losses schedule

2020

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2020 tax return. Superannuation funds should complete and attach this schedule to their 2020 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 2020, 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 2020-21 income year - excludes film losses

1 Tax losses carried forward to later income years

#### Year of loss

2019-20 **B** 

2018-19 **C** 

2017–18 **D** 

2016–17 **E** 

2015–16 **F** 

2014–15 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

2019–20 **H** 

2018–19

2017–18 **J** 

2016–17 **K** 

2015–16 **L** 

2014–15 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 2019–20 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 2019–20 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			
2019–20	A	Yes	No
2018–19	В	Yes	No
2017–18	С	Yes	No
2016–17	D	Yes	No
2015–16	E	Yes	No
2014–15 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

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

2020

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

  SM/7/7/H/S/7/
- 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 2020* 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 cap	pital gains an	d 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	E\$		<b>o</b> \$
Other real estate	F \$		P \$
Amount of capital gains from a trust (including a managed fund)	G \$		
Collectables	Н\$		Q \$
Other CGT assets and any other CGT events			R \$
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	<b>s</b> \$		Add the amounts at labels <b>K</b> to <b>R</b> and write the total in item <b>2</b> label <b>A – Total current year capital losses</b> .
Total current year capital gains	J \$		

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)	<b>D</b> \$
	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 <b>A</b> and <b>B</b> and transfer the total to label <b>V</b> – <b>Net capital losses carried forward to later income years</b> 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	<b>D</b> \$
6	Net capital gain	
	Net capital gain	A \$
		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.

7	Earnout arrangements		
	Are you a party to an earnout arrangement? <b>A</b> Yes, as a buyer (Print $X$ in the appropriate box.)	Yes, as a seller	No
	If you are a party to more than one earnout arrangement, copy and details requested here for each additional earnout arrangement.	d attach a separate sheet to this schedule providi	ing 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 following		ou wish
	Income year earnout right created	F	
	Amended net capital gain or capital losses carried forward	<b>G</b> \$	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**

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I declare that the information on this form is true and correct.					
Signature					
	Date Day	Mon	h /	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.

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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 ther trustee director or public efficer to ledge this toy return includin

• I am authorised by the partner, trustee, director or public officer to lodge this tax retu	irn, including any a	pplicable scr	nedules.	
Agent's signature	Date	1	1	
Contact name	Client Reference	)		
Agent's Phone Number T	HUI 5 [YbhBia VY	ŗ		