



Australian Government
Australian Taxation Office

Capital gains tax (CGT) schedule **2013**

^XXX

WHEN COMPLETING THIS FORM

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

S M I T H S T
- 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 2013* 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 capital gains and capital losses

	Capital gain	Capital loss
Shares in companies listed on an Australian securities exchange	A \$ ^KAR <div></div> , <div></div> , <div></div> , <div></div> ·X	K \$ ^KBB <div></div> , <div></div> , <div></div> , <div></div> ·X
Other shares	B \$ ^KAS <div></div> , <div></div> , <div></div> , <div></div> ·X	L \$ ^KBC <div></div> , <div></div> , <div></div> , <div></div> ·X
Units in unit trusts listed on an Australian securities exchange	C \$ ^KAT <div></div> , <div></div> , <div></div> , <div></div> ·X	M \$ ^KBD <div></div> , <div></div> , <div></div> , <div></div> ·X
Other units	D \$ ^KAU <div></div> , <div></div> , <div></div> , <div></div> ·X	N \$ ^KBE <div></div> , <div></div> , <div></div> , <div></div> ·X
Real estate situated in Australia	E \$ ^KAV <div></div> , <div></div> , <div></div> , <div></div> ·X	O \$ ^KBF <div></div> , <div></div> , <div></div> , <div></div> ·X
Other real estate	F \$ ^KAW <div></div> , <div></div> , <div></div> , <div></div> ·X	P \$ ^KBG <div></div> , <div></div> , <div></div> , <div></div> ·X
Amount of capital gains from a trust (including a managed fund)	G \$ ^KAX <div></div> , <div></div> , <div></div> , <div></div> ·X	
Collectables	H \$ ^KAY <div></div> , <div></div> , <div></div> , <div></div> ·X	Q \$ ^KBH <div></div> , <div></div> , <div></div> , <div></div> ·X
Other CGT assets and any other CGT events	I \$ ^KAZ <div></div> , <div></div> , <div></div> , <div></div> ·X	R \$ ^KBI <div></div> , <div></div> , <div></div> , <div></div> ·X
Total current year capital gains	J \$ ^KBA <div></div> , <div></div> , <div></div> , <div></div> ·X	

Add the amounts at labels **K** to **R** and write the total in item 2 label **A – Total current year capital losses**.



7 Earnout arrangements**^KBW**

Are you a party to an earnout arrangement? **A** Yes, as a buyer ☐

(Print ☐ in the appropriate box.)

Yes, as a seller ☐No ☐

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

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

What year of that arrangement are you in? **C** ☐ ☐ **^KBY**

If you are the seller, what is the total estimated capital proceeds from the earnout arrangement? **D** \$ **^KBZ** ☐, ☐☐☐, ☐☐☐☐. ☐

Amount of any capital gain or loss you made under your earnout arrangement in the income year. **E** \$ **^KCA** ☐, ☐☐☐, ☐☐☐☐. ☐ / ☐ ^{LOSS}

8 Other CGT information required (if applicable)**^KCC**

Small business 15 year exemption – exempt capital gains **A** \$ **^KCB** ☐, ☐☐☐, ☐☐☐☐. ☐ / ☐

Capital gains disregarded by a foreign resident **B** \$ **^KCD** ☐, ☐☐☐, ☐☐☐☐. ☐

Capital gains disregarded as a result of a scrip for scrip rollover **C** \$ **^KCE** ☐, ☐☐☐, ☐☐☐☐. ☐

Capital gains disregarded as a result of an inter-company asset rollover **D** \$ **^KCF** ☐, ☐☐☐, ☐☐☐☐. ☐

Capital gains disregarded by a demerging entity **E** \$ **^KCG** ☐, ☐☐☐, ☐☐☐☐. ☐

Taxpayer's declaration

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

Important

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

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

Signature

Date

Day	Month	Year
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Contact name

Daytime contact number (include area code)