

Junior Minerals Exploration Incentive Participation Form

Make sure you read the form instructions before completing this form.

More	informa	atior
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- Phone **13 28 66** between 8.00am and 6.00pm, Monday to Friday
- Visit our website ato.gov.au

Sp	pecify the income year to which this form relates				
S	ection A: Entity details				
1	Entity Tax file number (TFN)				
	TFN				
	The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file We will use the TFN to identify the entity in our records. It is not an offence not to provide the TFN do not provide the TFN, the processing of this form may be delayed.				
2	Australian business number (ABN)				
	ABN D DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD				
3	Company name				
	Positione address				
	Business address				
	Suburb/town/locality State	/territory	Postcode		
	If the entity's postal address is the same as the main business address, place a cross in this box.				
	Postal address				
	Suburb/town/locality State	/territory	Postcode		
	Contact person				
	Title: Mr Mrs Miss Ms Other				
	Family name	_			
	First given name Other given names				
	Phone number				
	Email address of contact person (use BLOCK LETTERS)				

Section B: Junior Minerals Exploration Incentive details Will you be a greenfields mineral explorer in the income year to which this form relates? You are not eligible to participate in the exploration development incentive for this income year. Please do not submit this form. Complete questions 5, 6, 7 and 8 below. Yes Estimated amount of greenfield exploration expenditure to be incurred for the income year to which this form relates \$ -90 Estimated amount of tax loss for the income year to which this form relates \$ ->< 7 Estimate corporate tax rate for the income year to which this form relates %

Estimated capital to be raised in the income year to which this form relates

OFFICIAL: Sensitive (when completed)

\$

Authorised person signing this declaration (Complete all of the fields below) Full name of signatory Position held (for example, public officer, trustee or authorised tax agent) Business hours phone number Registered tax agent number (if applicable) Before you sign this form Make sure you have answered all the relevant questions correctly and read the privacy statement below before you sign and date this page. An incomplete form may delay processing and we may ask you to complete a new form. Penalties may be imposed for giving false or misleading information. **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 to disclose it to other government agencies. For information about your privacy go to ato.gov.au/privacy Place an $|\chi|$ at the appropriate declaration statement. I declare that I am authorised to complete this form for the entity and the information contained in this form is true and correct. OR I declare that: I am an agent or registered tax agent authorised to complete this form on behalf of the entity ■ the form has been prepared in accordance with the information supplied by that entity I have received a declaration from that entity, stating that the information provided to me is true and correct ■ I am authorised by that entity to give this form to the Commissioner of Taxation. Signature Date You MUST SIGN here

Lodging this form

Section C: Declaration

Make a copy of your form for your own records before you:

■ sign in to Online services for business, navigate to mail, select 'New message', Exploration Incentives and JMEI lodgment