

Ancillary fund return 2012

Specify period if part year or approved substitute period

| Day | IVIOTILI | rear | Day | IVIOTILTI | rear |
|-----|----------|------|-----|-----------|------|
| | // | | to | // | |

WHO SHOULD COMPLETE THIS FORM

Only public and private ancillary funds should complete this form. This includes those private ancillary funds that were formerly prescribed private funds (PPFs).

WHEN COMPLETING THIS FORM

Use the *Ancillary fund return instructions 2012* (NAT 73641) available on our website at **www.ato.gov.au** when completing this form.

See the privacy note at **Completing and lodging the return** in the instructions for further information.

The guidelines referred to are the *Public ancillary fund* guidelines 2011 for public ancillary funds and the *Private* ancillary fund guidelines 2009 for private ancillary funds including former prescribed private funds.

HOW TO COMPLETE THIS FORM

- Read the instructions on how to complete this form.
- You may type directly into this form before printing or you may print the form and write the information.
- If typing, first check that you can save a copy of the completed form to your computer by entering text into the first field, saving and closing the file, then re-opening it to check that the text you entered is displayed.
- If you cannot save the form, print a completed copy before you close it.
- If writing, use BLOCK LETTERS.
- lacksquare Place $ig|\mathcal{X}ig|$ in ALL applicable boxes.
- Show whole dollars only, do not show cents.
- All funds must complete Sections A, B, C, D, F, G, H, I and J.
- If the fund is a former prescribed private fund distributing under the transitional distribution rules it must also complete Section E.
- Print and sign the form.

| S | ection A: Fund information |
|---|--|
| 1 | Name of fund |
| | |
| 2 | Australian business number (ABN) of fund |
| | Information is collected for the purposes of the <i>A New Tax System (Australian Business Number) Act 1999</i> and may be used to update your details on the Australian Business Register. See the privacy note at Completing and lodging the return in the <i>Ancillary fund return instructions 2012</i> for further information. |
| 3 | Current postal address |
| | Suburb or town State/territory Postcode |
| | |
| 4 | Type of fund |
| | Public ancillary fund |
| | Private ancillary fund |

ADDRESS FOR NOTICES

| Australian Company Nun number or incorporation | | | | | |
|---|--|--|--|---|----------------|
| Tax file number (TFN) | | Act 1953 to colle at Completing a | ct your TFN. S nd lodging th | the Taxation Admin See the privacy no le return in the An or further informati | te ncillary |
| Current postal address | | | | | |
| | | | | | |
| | | | | | |
| Suburb or town | | | | State/territory | Postcode |
| | | | | | |
| Email address | | | | | |
| Phone number (include a | rea code) | | | | |
| Preferred director of the | constitutional corporation | on | | | |
| Title: Mr Mrs N | liss Ms Other | | | | |
| Family name | | | | | |
| Photo de la companya | | Oller 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, | | | |
| First given name | | Other given name/s | | | |
| | | | | | |
| Email address | | | | | |
| | | | | | |
| | rea code) | | | | |
| Phone number (include a | | e fund? No Yes | | | |
| Phone number (include a | responsible person for the | | | | |
| Phone number (include a | | | | | |
| Phone number (include a ls the preferred director a | responsible person for the | | | | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs | responsible person for the | | | | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs | responsible person for the | here | | | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the | | | | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the | Other given name/s | Tayation Adm | vinistration (lot 10) | |
| Phone number (include a ls the preferred director a | responsible person for the dividual show details I | Other given name/s The ATO is authorised by the FN. See the privacy note at | Completing a | and lodging the r | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the dividual show details I | Other given name/s he ATO is authorised by the | Completing a | and lodging the r | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the dividual show details I | Other given name/s The ATO is authorised by the FN. See the privacy note at | Completing a | and lodging the r | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the dividual show details I | Other given name/s The ATO is authorised by the FN. See the privacy note at | Completing a | and lodging the r | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the dividual show details I | Other given name/s The ATO is authorised by the FN. See the privacy note at | Completing a | and lodging the r | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the dividual show details I | Other given name/s The ATO is authorised by the FN. See the privacy note at | Completing a | and lodging the r | |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the dividual show details I | Other given name/s The ATO is authorised by the FN. See the privacy note at | Completing a | and lodging the r | return in th |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the dividual show details I | Other given name/s The ATO is authorised by the FN. See the privacy note at | Completing a | and lodging the r | return in th |
| Phone number (include a ls the preferred director a lf the trustee is an in Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs | responsible person for the dividual show details I | Other given name/s The ATO is authorised by the FN. See the privacy note at | Completing a | and lodging the r | return in th |

Section B: Estimated market value of the fund's net assets at the end of the previous financial year

7 Estimated market value of the fund's gross assets Estimated market value of the fund's gross assets at the end of the previous financial year

A \$.≫

8 Liabilities

Borrowings at the end of the previous financial year

Other liabilities at the end of the previous financial year

Total liabilities at the end of the previous financial year (total of labels B to C)

B \$.∞ C \$

D \$ ->×

Estimated market value of the fund's net assets
Estimated market value of the fund's net assets at the
end of the previous financial year (label A less label D)

E \$ -∞

Section C: Donations received

10 Donations received

Total of money received

Total of the value of shares in a publicly listed entity received

Total of the value of shares in an unlisted entity received

Total of the value of collectibles received

Total of the value of land and buildings received

Total of the value of other property received

Total of the value of donations received (total of labels A to F)

| | ~ | | |
|---|----|---|---|
| В | \$ | | × |
| С | \$ | | × |
| D | \$ | | × |
| Ε | \$ | | × |
| F | \$ | | × |
| G | \$ | 1 | × |

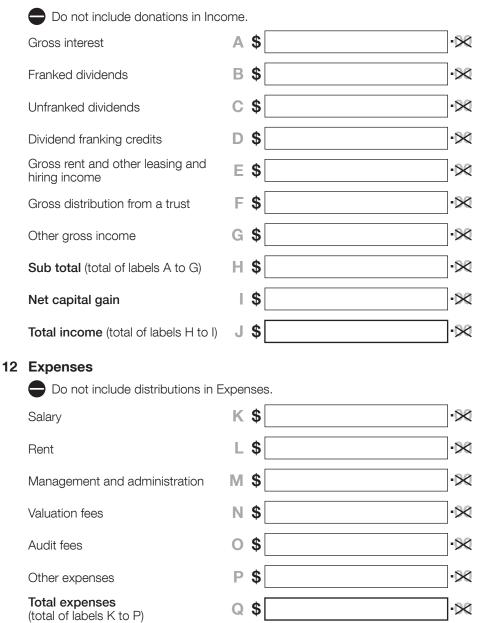
-00

Δ \$

Section D: Income

① Do not include an unrealised loss or gain under Income or Expenses. These would be reflected in the estimated market value of the fund's assets.

11 Income



13 Net income

Net income (label J less label Q)

Section E: Former Prescribed Private Funds (PPFs) distributing under the transitional distribution rules

| | ① Complete this section only if you are a former PPF distributing under the transitional distribution rules. |
|----|--|
| 14 | Amount of trust income retained |
| | Amount of trust income retained under private ancillary fund guideline 55 to reflect movements in the CPI |

Section F: Distributions made

igoplus Show distributions made in the financial year. Combine distributions made to the same recipient. If there is insufficient space add an additional Section F page by printing an extra page.

15 Distributions made

| A | В | С | D |
|-------------------|------------------|-------------------|-------------------------------|
| Name of recipient | ABN of recipient | Money distributed | Value of property distributed |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |

| Total value of distributions made (total of all C and D amounts) | E \$ | ·× |
|--|------|----|
|--|------|----|

Section G: Estimated market value of the fund's net assets at the end of the financial year

16 Assets

| | Cash | A | \$ ->< | 1 |
|----|---|-----|-----------|---|
| | Estimated market value of shares in a publicly listed entity | В | \$ ->< | j |
| | Estimated market value of shares in an unlisted entity | C | \$ ->× | į |
| | Loans | D | \$ •× | į |
| | Estimated market value of land and buildings | Е | \$ ->< | j |
| | Estimated market value of other property | F | \$ ·× | j |
| | Estimated market value of other investments | G | \$ ·× | ļ |
| | Total estimated market value of the fund's gross assets at the end of the financial year (total of labels A to G) | Н | \$ ·× | 1 |
| 17 | Liabilities | | | |
| | Borrowings | - 1 | \$ •× | Į |
| | Other liabilities | J | \$ ·× | 1 |
| | Total liabilities at the end of the financial year (total of labels I to J) $$ | K | \$ ·× | 1 |
| 18 | Estimated market value of the fund's net assets Estimated market value of the fund's net assets at the end of the financial year (label H less label K) | L | \$ ·× | 1 |

Section H: Trustees

WHERE THE TRUSTEE IS A CONSTITUTIONAL CORPORATION

19 Show the details of any director of the constitutional corporation who is a responsible person for the fund and is not shown in Section A: Fund Information.

| If there is insufficient space, please print additional copies of this page or attach a spread all additional director details for question 19. | dsheet or docume | ent containing |
|---|------------------|----------------|
| Name Title: Mr Mrs Miss Ms Other | | |
| Family name | | |
| First given name Other given name/s | | |
| Current postal address | | |
| Suburb or town | State/territory | Postcode |
| Email address | | |
| Phone number (include area code) | | |
| Name Title: Mr Mrs Miss Ms Other Family name | | |
| First given name Other given name/s | | |
| Current postal address | | |
| Suburb or town | State/territory | Postcode |
| Email address | | |
| Phone number (include area code) | | |

| Name | | | |
|----------------------------------|--------------------|--------------------|---------|
| Title: Mr Mrs Miss Ms Other | | | |
| Family name | | | |
| | | | |
| First given name | Other given name/s | | |
| | | | |
| Current postal address | | | |
| | | | |
| | | | |
| Suburb or town | | State/territory P | ostcode |
| | | | |
| Email address | | | |
| | | | |
| Phone number (include area code) | | | |
| Name | | | |
| Title: Mr Mrs Miss Ms Other | | | |
| Family name | | | |
| | | | |
| First given name | Other given name/s | | |
| | | | |
| Current postal address | | | |
| | | | |
| | | | |
| Suburb or town | | State/territory P | ostcode |
| | | | |
| Email address | | | |
| | | | |
| Phone number (include area code) | | | |
| Name | | | |
| Title: Mr Mrs Miss Ms Other | | | |
| Family name | | | |
| | | | |
| Eirst given name | Other given name/s | | |
| | | | |
| Current postal address | | | |
| | | | |
| | | | |
| Suburb or town | | State/territory Po | ostcode |
| | | | |
| Email address | | | |
| Littali dddless | | | |
| | | | |
| Phone number (include area code) | | | |

WHERE THE TRUSTEE IS AN INDIVIDUAL

20 Show the details of any trustee who is an individual who is not shown in Section A: Fund information.

| If there is insufficient space, please print additional copial additional director details for question 20. | ies of this page, or attach a spreadsheet or document containing |
|---|--|
| Name Title: Mr Mrs Miss Ms Other Family name | |
| First given name O | ther given name/s |
| This given hame | the given hame/s |
| your TFN. See Ancillary fund re | s authorised by the <i>Taxation Administration Act 1953</i> to collect the privacy note at Completing and lodging the return in the eturn instructions 2012 for further information. |
| Current postal address | |
| | |
| Suburb or town | State/territory Postcode |
| | |
| Email address | |
| | |
| Phone number (include area code) Is the trustee a responsible person for the fund? No | Yes |
| Name Title: Mr Mrs Miss Ms Other Family name | |
| | |
| First given name O | ther given name/s |
| | |
| your TFN. See | s authorised by the <i>Taxation Administration Act 1953</i> to collect the privacy note at Completing and lodging the return in the <i>eturn instructions 2012</i> for further information. |
| Current postal address | |
| | |
| | |
| Suburb or town | State/territory Postcode |
| | |
| Email address | |
| | |
| Phone number (include area code) Is the trustee a responsible person for the fund? No | Yes |
| | |

| Name |
|---|
| Title: Mr Mrs Miss Ms Other |
| Family name |
| |
| First given name Other given name/s |
| |
| TFN The ATO is authorised by the <i>Taxation Administration Act 1953</i> to collect your TFN. See the privacy note at Completing and lodging the return in the <i>Ancillary fund return instructions 2012</i> for further information. |
| Current postal address |
| |
| |
| Suburb or town State/territory Postcode |
| |
| Email address |
| |
| |
| Phone number (include area code) |
| Is the trustee a responsible person for the fund? No Yes |
| |
| Name |
| Name Title: Mr Mrs Miss Ms Other |
| |
| Title: Mr Mrs Miss Ms Other |
| Title: Mr Mrs Miss Ms Other |
| Title: Mr Mrs Miss Ms Other Family name |
| Title: Mr Mrs Miss Ms Other Family name |
| Title: Mr Mrs Miss Ms Other Family name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the |
| Title: Mr Mrs Miss Ms Other Family name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. |
| Title: Mr Mrs Miss Ms Other Family name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. |
| Title: Mr Mrs Miss Ms Other Family name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. |
| Title: Mr Mrs Miss Ms Other Family name First given name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. Current postal address |
| Title: Mr Mrs Miss Ms Other Family name First given name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. Current postal address Suburb or town State/territory Postcode |
| Title: Mr Mrs Miss Ms Other Family name First given name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. Current postal address |
| Title: Mr Mrs Miss Ms Other Family name First given name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. Current postal address Suburb or town State/territory Postcode |
| Title: Mr Mrs Miss Ms Other Family name First given name Other given name/s TFN The ATO is authorised by the Taxation Administration Act 1953 to collect your TFN. See the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. Current postal address Suburb or town State/territory Postcode |

| | Name | | | | |
|--|---|-----------------|----------|---------|--|
| | Title: Mr Mrs Miss Ms Other | | | | |
| | Family name | | | | |
| | First given name Other given name/s | | | | |
| | | | | | |
| TFN The ATO is authorised by the <i>Taxation Administration Act 1953</i> your TFN. See the privacy note at Completing and lodging the retu Ancillary fund return instructions 2012 for further information. | | | | | |
| | Current postal address | | | | |
| | | | | | |
| | Suburb or town | State/terri | itory Pc | ostcode | |
| | | | | | |
| | Email address | | | | |
| | | | | | |
| | Phone number (include area code) | | | | |
| | Is the trustee a responsible person for the fund? No Yes | | | | |
| | | | | | |
| | | | | | |
| Se | ection I: Information relating to entitlement to e | ndorsemen | ıt | | |
| | Insert \overline{X} in the No or Yes box where applicable. | | | | |
| All | funds | | | | |
| Α | Have the fund's financial statements been audited? | | No | Yes | |
| В | Has the trustee advised the Commissioner of every change to the fund's governing ru | ıles? | No | Yes | |
| С | Has the market value of assets other than land been estimated as at the end of the fi | nancial year? | No | Yes | |
| D | Has the market value of land been estimated within the last three financial years? | | No | Yes | |
| E | Was every financial dealing of the fund with an associated person or entity made at a | rm's length? | No | Yes | |
| All | public ancillary funds | | | | |
| F | Has the fund's auditor confirmed compliance by the fund and the trustee with the pu fund guidelines? | olic ancillary | No | Yes | |
| G | Did the fund wind up or cease to be a public ancillary fund? | | No | Yes | |
| Н | Was the public invited to contribute to the fund? | | No | Yes | |
| ı | Did the public, or a significant part of it, contribute to the fund? | | No | Yes | |
| ΔΙΙ | private ancillary funds | | | | |
| J | Has the fund's auditor confirmed compliance by the fund and the trustee with the prifund guidelines? | ate ancillary | No | Yes | |
| K | Did the fund wind up or cease to be a private ancillary fund? | | No | Yes | |
| ΔΙΙ | private ancillary funds that were formerly a prescribed private fund (PPF) | | | | |
| L | If the fund was formerly a PPF did it choose not to apply the transitional distribution r financial year? | ules during the | No | Yes | |

Section J: Declarations Penalties may be imposed for giving false or misleading information. In addition, penalties may be imposed for non-compliance with the Public ancillary fund guidelines or the Private ancillary fund guidelines. Pefer to the privacy note at Completing and lodging the return in the Ancillary fund return instructions 2012 for further information. This declaration must be signed by a trustee or director or public officer authorised to sign on behalf of the trustee. **DECLARATION** I declare that the information in this return is true and correct. Name of signatory Position held Signature of authorised trustee or director or public officer Date TAX AGENT'S DECLARATION I declare that this return has been prepared in accordance with the information provided by the trustee, that the trustee has given me a declaration stating that the information provided to me is true and correct, and that the trustee has authorised me to lodge this return. Contact name Tax agent's phone number (include area code) Tax agent's reference number Client's reference Signature Date

| | _ | |
|---|---|----|
| 4 | | |
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HOW TO LODGE THIS FORM

Send the completed form by the lodgment due date to:

Australian Taxation Office GPO Box 9845 IN YOUR CAPITAL CITY

The address must appear as shown above.