

Life insurance companies taxation schedule

lie i	When completing this form
a life insurance company orthe head company of a consolidated group that includes	Print clearly in BLOCK LETTERS using a black pen only.
at least one member that is a life insurance company	8 11 7 14 8 7
which derived income from the complying superannuation and/or segregated exempt asset classes.	■ Place X in ALL applicable boxes.
and/or segregated exempt asset classes.	
Tax file number (TFN) Australian	business number (ABN)
Name of entity	
Contact name	
Daytime contact number (include area code)	
Is the entity a consolidated head company? No Y	'es
1 Income – segregated exempt assets (SEA)	
Ordinary and statutory income (other than p	premiums) A \$
Ordinary and statutory income (other than p	Jiermanis) A 4
Premiums – exempt life insurance	ce policies B\$,
Ordinary class	Complying superannuation class
2 Assessable income	
Premiums from	
Premiums from accident and disability C \$]-≫
accident and disability C\$,	
accident and disability C\$,]->< -><
accident and disability C\$, , , , , , , , , , , , , , , , , ,	.w
accident and disability C\$,	-× E\$,
accident and disability C\$, , , , , , , , , , , , , , , , , ,	- ≥ E \$
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accident and disability C\$,,,	-> > >
accident and disability C\$,, , , , , , , , , , , , , , , , , ,	-> > >
accident and disability C\$,, , , , , , , , , , , , , , , , , ,	-> E\$
accident and disability and term policies Premiums – other life insurance policies Total ordinary income F\$	-> > > >
accident and disability C\$	-> -> <br< td=""></br<>

5	Transfers
	Transfers to complying superannuation asset pool N\$,
	Transfers from complying superannuation asset pool 0 \$,
	Transfers to SEA P\$,
	Transfers from SEA Q \$,
6	Exploration credit tax offset
	Exploration credit tax offset R\$
Ta	xpayer'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 that the information provided is true and correct in every detail. If you are in doubt about any aspect of the form, 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
	Declaration: I declare that the information on this form is true and correct.
	Public officer's signature
	Date Day Month Year
	Public officer's name
	Daytime contact number (include area code)