

## Interposed entity election or revocation

2018

Page 1

Print neatly in BLOCK LETTERS with a black or blue ballpoint pen only

		i illicileatiy ili	DLOCK LLTT	End with a black of blue ballpoint perforily.						
			of t	Tax file number (TFN) he trust, company or partnership						
To make or revoke an interposed entity election in accordance with section 272-85 of Schedule 2F to the <i>Income Tax Assessment Act</i> 1936 (ITAA 1936), you must complete items <b>1</b> and <b>2</b> , item <b>3</b> if it applies, item <b>4</b> and the declaration on page 4. You must also complete section <b>A</b> for an <b>election</b> or section <b>B</b> for a <b>revocation</b> . If you don't have enough space to complete an item, or if an item requires you to provide further information, attach a separate sheet of paper with the additional information.										
1	Are you using this form for	re you using this form for an election or a revocation?  Print E for election or R for revocation.								
2	or partnership for which the	ull name and current postal address (including country – if outside Australia) of the trust (including fund), company partnership for which the interposed entity election or revocation is made (interposed entity). In the case of a ompany, also provide the Australian company number (ACN) or Australian registered body number (ARBN).								
	Full name of the interposed entity (trust, company or partnership)									
	(trade, dompany or partnoromp)			ACN/ARBN*						
				* Cross out whichever is not applicable						
	Current postal address of the interposed entity									
		Suburb or town		State Postcode , ,						
3	If the name and/or the postal address for the trust (including fund), company, or partnership identified in item 2 above has changed since its last tax return (if any) was lodged, print it exactly as shown on the last notice of assessment or the last tax return lodged.									
	Full name of the interposed entity									
	(trust, company or partnership) as shown on last notice of assessment									
	or last tax return lodged									
	Postal address of the interposed entity as shown on									
	last notice of assessment or last tax return lodged									
	•	Suburb or town		State Postcode						
		Country – if not Australia								
		- Country in not y desirand								
4	Interposed entity election – entity code  Print C for company, P for partnership, T for trust or F for fund.									
 Se	ection A: <b>Interposed en</b>	tity election spe	cifving a	day in the 2004–05 or later income year						
	_		-							
oa	a If the interposed entity is a trust (including fund), was the central management and control of the trust outside Australia at any time during the period from the election commencement time (see items 7 and 8) until the time the election is made (relevant period)?  Print Y for yes or N for no.									
	If you printed Y, specify the time(s) a management and control was outsic		Full period	Print <b>F</b> in the box if the central management and control of the trust was outside Australia at all times during the relevant period <b>OR</b> specify the time(s) during the relevant period at which central management and control of the trust was outside Australia.						
	If more than one time period is to be sheet of paper with details of the ad		e from	Day         Month         Year         To         Day         Month         Year						
δb	If the interposed entity is a company, was the company a non-resident for tax purposes at any time during the period from the election commencement time (see items 7 and 8) until the time the election is made (relevant period)?									
	If you printed <b>Y</b> , specify the time(s) a was a non-resident for tax purposes		Full period	Print F in the box if the company was a non-resident for tax purposes at all times during the relevant period OR specify the time(s) during the relevant period at which the company was a non-resident for tax purposes.						
	If more than one time period is to be sheet of paper with details of the ad		e from	Day Month Year to Day Month Year						

and residency details of every trustee of the trust or partner of the partnership respectively during the period from the election commencement time (see items 7 and 8) until the time the election is made (relevant period). Where any trustee or partner is a company, the ACN or ARBN of each such trustee or partner is also required. If there was more than one trustee of the trust or partner of the partnership during the relevant period, attach a separate sheet of paper with all the information required for each additional trustee or partner. TFN of trustee or partner See the Privacy note in the Declaration. OR Print X in the box if the trustee or partner does not have a TFN If the trustee or partner is an individual Title - for example, Mr, Mrs, Ms, Miss Surname or family name Given names If the trustee or partner is a company Name ACN/ARBN\* \*Cross out whichever is not applicable. Current postal address of the trustee or partner Suburb or town State Postcode Country - if not Australia At any time during the relevant period was the Print Y for yes If you printed Y, specify the time(s) at which the trustee or trustee or partner a non-resident for tax purposes? or N for no. partner was a non-resident for tax purposes. Print F in the box if the trustee or partner was a non-resident for tax purposes at all times during the relevant period Full period OR Specify the time(s) during the relevant period at which the trustee or partner was a non-resident for tax purposes. Day Month Day to If more than one time period is to be specified, attach a separate sheet of paper with details of the additional time periods in relation to the trustee or partner. Write the four-digit, 2005 or later, income year specified for the purposes of the interposed entity election. If the specified income year does not end on 30 June, state the substituted accounting period for that specified income year. Write also the day specified in that income year for the purposes of the election. Note that a day must be specified for an election to be made. Income year Day specified Substituted accounting period specified Month Month Dav Year Dav Yea from to The election commencement time for the interposed entity election. Note: Only complete this item if specifying the 2017–18 income year and if the family control test in section 272-87 of Schedule 2F to the ITAA 1936 has NOT been satisfied at all times during the 2017–18 income year from the day

If the interposed entity is a trust (including fund) or partnership, provide the full name, TFN, current postal address

Note: Only complete this item if specifying the 2017–18 income year and if the family control test in section 272-87 of Schedule 2F to the ITAA 1936 has NOT been satisfied at all times during the 2017–18 income year from the day specified in item 7. In these circumstances, the election commencement time will be the later of the earliest time from which the family control test was passed continuously until the end of the 2017–18 income year and the beginning of the day specified in item 7.

)	Full name, TFN and current of which the interposed ent						- if outs	ide Au	ıstralia) of t	he family	trust in re	spect
	TFN of the family trust			1			OR		Print <b>X</b> in the trust does not			
	Full name of the family trust											
	, , ,											
	Current postal address of the family trust											
	,,,											
		Suburb or town							Sta	ite , ,	Postcode	
		Country – if not	Australia									
	<b>Note:</b> If an interposed entity e election or revocation 2	election is 2018 must	made be co	in res mplet	spect of ted for	f more tl each ele	nan one ection in	family respec	trust a sepa t of each far	rate <i>Interp</i> mily trust.	osed entit	У
0	The income year specified i											
	identified in item 11 AND the year does not end on 30 Jur										specified	income
		on commend he family trus					Suk	ostituted	d accounting pe	eriod of the f	family trust	
	Day	Month	Year		fro	Day	Month	Ye	ear to	Day	Month	Year
	Note: The energiad income:	Lack and th		<u> </u>			+ +i h					Llo o
	Note: The specified income y details provided in section for the family trust identification.	tion <b>A</b> of that if it is the title of the t	ne relevo date	vant f was s	amily t	rust elec	tion that	t has b	een lodged	or given to	the Ćom	missione
	commencement time b	ox at this	item b	lank.								
11	Full name, TFN, date of birth Australia) of the individual (struct election for the trust in the included	specified	individ	dual)	whose	family	group is	taken	into accou	nt in relat	tion to the	family
	to be included.  TFN of the					]	OR		Print X in the I			
	specified individual  Date of birth of the	Day Mo	onth	Yea	r				individual does	s not have a	TFN.	
	specified individual											
	Full name of the	Title – for exan	mple, Mr,	Mrs, M	s, Miss			1				
	specified individual	Surname or fa	mily nam	е				Give	n names			
	Current address of principal place of residence of											
	the specified individual											
		Suburb or town							Sta	ite , ,	Postcode	
		Country – if not	Australia									
<b>l</b> o	ote: Only complete section	<b>B</b> if revol	king a	n inte	erpose	ed entity	/ election	on oth	erwise go	to <b>Decla</b> r	ration on	page 4.
 Se	ection B: <b>Interposed er</b>	ntity rev	ocat	ion								
2	Full name, TFN and current which the interposed entity	postal ad election i	dress n this	(inclu	uding o	ountry ig revol	- if outs ced.	ide Au	ıstralia) of t	he family	trust in re	spect of
	TFN of the family trust		1 1	1	1 1							
	Full name of the family trust											
	iairiiiy ti dot											
	Current postal address											
	of the family trust											
		Cuburb or tour							01-	to.	Postood-	
		Suburb or town	Australia						Sta	ire I I	Postcode	
		Country – if not	Australia									
3	The income year from which	n the revo	cation	is to	be eff	ective.			Income year			

**Note:** If revoking an interposed entity election in respect of more than one family trust, a separate *Interposed entity* election or revocation 2018 must be completed for each election being revoked in respect of each family trust.

## **Declaration**

## **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** 

I/We declare 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, and that the trustee(s)/company/partners is/are making or revoking an interposed entity election, the details of which are set out above, for the purposes of section 272-85 of Schedule 2F to the ITAA 1936 and that the trustee(s)/company/partners is/are able to make or revoke the election in accordance with that section.

Full name of the trustee(s)/the company public officer/the partners at the time the election is made.

**Note**: If the election is being made for a trust (including fund) or partnership, the name of the trustee or partner must be written exactly as it appears at item **6**.

If an individual	
Title – for example, Mr, Mrs, Ms, Miss	Surname or family name
Given names	
If the trustee or partner is a company	
Name	
Signature of the trustee/company public officer/partner or, if the trustee or partner is a company, the signature of the public officer of the corporate trustee/partner	
	Date declaration made    Day Month Year
If there is more than one trustee of the trust or partner of the partnership at the details and signature for each additional trustee or partner.	time the election is made, attach a separate sheet of paper with the above
For more information, see the explanatory notes for	or the Interposed entity election or revocation 2018.
Hours taken to prepare and complete this form	(See notes below.)

The ATO is committed to reducing the costs of complying with your taxation obligations.

By completing this item you will help us to monitor these costs as closely as possible.

When completing this item the trust, company or partnership should consider the time, rounded up to the nearest hour spent:

- · reading the instructions
- · collecting the necessary information to complete this form
- making any necessary calculations, and/or
- · actually completing this form.

## Notes:

- 1. The answer should reflect the time both your business and tax agent spent preparing and completing this form. This includes the time spent by any other person whose assistance was obtained, such as an employee of the business.
- 2. If this form is lodged with the 2018 tax return, the answer should be included in the time box provided on the tax return.