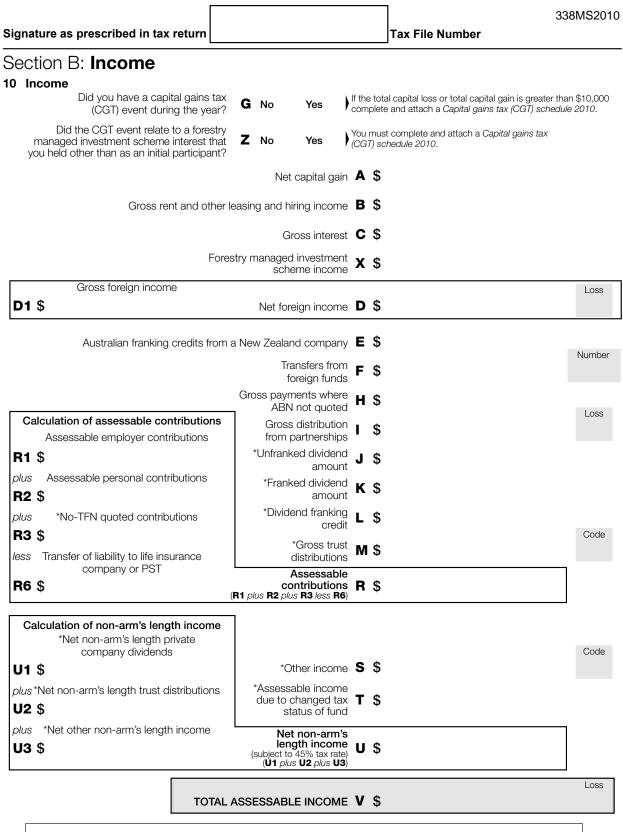
Signature	as	prescribed	in	tax	return
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Self-managed superannuation fund annual return



On cor Fur	 bo should complete this annual return? Iy self-managed superannuation funds (SMSFs) can mplete this annual return. All other funds must complete the <i>nd income tax return 2010</i> (NAT 71287). The Self-managed superannuation fund annual return structions 2010 (NAT 71606) (the instructions) can assist ou to complete this annual return. 	■ Print ■ Use	clearly, usin BLOCK LE	THIS ANNUAL RETURN g a BLACK pen only. TTERS applicable boxes.	
Se	ection A: Fund information			processing, write the fund's	
1	Tax file number (TFN) The Tax Office is authorised by law to request your TFN. You could increase the chance of delay or error in processing your a	u are not o	bliged to quo	p of pages 3 and 5. ote your TFN but not quoting it	
2	Name of self-managed superannuation fund (SM	SF)			
3	Australian business number (ABN) (if applicable)				
4	Current postal address				
Sub	burb/town			State/territory	Postcode
5	Annual return status Is this an amendment to the SMSF's 2010 annual return?	No	Yes		
Title	Fund auditor ditor's name e: Mr Mrs Miss Ms Other nily name				
Firs	t given name Other given	n names			
	ofessional body Membership number Code stal address			Auditor's phone nur	nber
Sub	burb/town			State/territory	Postcode
Dat	te audit was completed A / / /		Was the a	udit report qualified? B No	Yes
8	Status of SMSF Australian superannuation fund	A No	Yes	Fund benefit structure	B Code
	Does the fund trust deed allow acceptance of the Government's Super Co-contributions?	C No	Yes		
9	Was the fund wound up during the income year? No Yes If yes, provide the date on which the fund was wound up Day	Month	Year	Have all tax lodgment and payment No obligations been met?	Yes



*If an amount is entered at this label, check the instructions to ensure the correct tax treatment has been applied.

				338MS2010
Signature as prescribed in tax ret	urn		Tax File Number	
Place your attachments here	e.			
Section C: Deductions	Exempt current pension income	κ	\$	
Intere	st expenses within Australia	A	\$	
	Interest expenses overseas	В	\$	
	Capital works deductions	D	\$	
Deduction for decline in	value of depreciating assets	Е	\$	
Small business and	l general business tax break	Ρ	\$	
[Death or disability premiums	F	\$	
	Death benefit increase	G	\$	
	Approved auditor fee	Н	\$	
	Investment expenses	I	\$	
Management a	nd administration expenses	J	\$	
Forestry managed inv	estment scheme deduction	U	\$	Quela
	Other deductions	L	\$	Code
	Tax losses deducted	Μ	\$	
	TOTAL DEDUCTIONS	Ν	\$	
	KABLE INCOME OR LOSS	0	\$	Loss

Section D: Income tax calculation statement

2 Inco	me tax calculation statement	Taxable income	Α	\$
C1 \$	Credit: foreign income tax offset	Gross tax	В	\$
plus C2 \$	Credit: rebates and tax offsets	Rebates and offsets (C1 plus C2)	С	\$
F1 \$	Credit: interest on early payments	SUBTOTAL (B less C)	D	\$ (Cannot be less than zero)
plus F2 \$	Credit: foreign resident withholding	Section 102AAM interest charge	Е	\$ (,
plus Cri F3 \$ plus	edit: ABN/TFN not quoted (non-individual) Credit: refundable franking credits	Eligible credits (F1 plus F2 plus F3 plus F4 plus F5 plus F6 plus F7)	F	\$
F4 \$ plus	Credit: no-TFN tax offset	PAYG instalments raised	G	\$
F5 \$ _{plus} F6 \$	Credit: interest on no-TFN tax offset	Supervisory levy	Η	\$
plus F7 \$	Credit: refundable National rental affordability scheme tax offset			

(D plus E less F less G plus H)

						338MS2010
Signature as prescribed in tax	return				Tax File Number	
Section E: Losses		T . 1				
If total loss is greater than a	\$100,000,	Tax losses carrie to later inco			\$	
or there is a foreign loss, comp attach a <i>Losses schedule 2010</i>		Net capital loss forward to later inco			\$	
Section F: Member i	nformat	tion				
Report current members at 30 rollover) during the financial year. Inclu						
MEMBER 1						
Title: Mr Mrs Miss Ms Family name	Other					
First given name		Other given names				
				Day	Month Year	
Member's TFN		Date of	birth		/ /	
Contributions	OPENING A	ACCOUNT BALANCE	\$			
Include contributions L reported to you on a	Er	mployer contributions	A \$;]
Rollover benefits statement (RBS) (NAT 70944).		mployer A1	•			
		Personal contributions	в\$;		
CGT sr	mall business	retirement exemption	с\$	5		
CGT small bu	usiness 15-ye	ar exemption amount	D \$	5		
	P	ersonal injury election	Е\$	5		
	Spouse a	nd child contributions	F \$	5		
0	ther family an	d friend contributions	G\$;		
Directed terminat	ion (taxable c	omponent) payments	Н\$	5		
Assessable fo	oreign superar	nnuation fund amount	I\$	5		
Non-assessable fo	oreign superar	nnuation fund amount	J\$	5		
Transfe	er from reserve	e: assessable amount	К\$	5		
Transfer from	m reserve: noi	n-assessable amount	L \$	5		
Any other contributions	(including Su	per Co-contributions)	М\$	5		
	ΤΟΤΑ	L CONTRIBUTIONS	N \$	5		
Other transactions	Allocated e	earnings or losses O	\$			Loss
Exclude any rollover components reported at N		d rollover amounts P	\$			
from amounts reported at P . If P is negative, transfer the loss to O .	Outward	d rollover amounts	\$			
1035 10 U .	Benefit pa	ayments and code R	\$			Code
CL	OSING ACC		\$			

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Signature of procesibed in t		338MS2010
Signature as prescribed in t		
	at 30 June 2010 and former members who were paid a benefit (lump sum or income strea r. Include members for whom no contributions were received. Report deceased members	
MEMBER 2		
Title: Mr Mrs Miss Family name	Ms Other	
First given name	Other given names	
Member's TFN	Day Month Year Date of birth / /	
Contributions	OPENING ACCOUNT BALANCE \$	
Include contributions reported to you on a Rollover benefits statement	Employer contributions A \$	
<i>(RBS)</i> (NAT 70944).	ABN of principal employer A1	
	Personal contributions B \$	
CC	GT small business retirement exemption C \$	
CGT sm	all business 15-year exemption amount D \$	
	Personal injury election E\$	
	Spouse and child contributions F \$	
	Other family and friend contributions G \$	
Directed terr	mination (taxable component) payments H \$	
Assessat	ble foreign superannuation fund amount 📔 \$	
Non-assessat	ble foreign superannuation fund amount J \$	
Tra	ansfer from reserve: assessable amount K\$	
Transfe	er from reserve: non-assessable amount L\$	
Any other contribu	tions (including Super Co-contributions) M \$	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses O \$	Loss
Exclude any rollover components reported at N	Inward rollover amounts P \$	
from amounts reported at P . If P is negative, transfer the	Outward rollover amounts Q \$	
loss to O .	Benefit payments and code R \$	Code
	CLOSING ACCOUNT BALANCE S \$	

Signature as prescribed in t	tax return Tax File Number	338MS2010
	at 30 June 2010 and former members who were paid a benefit (lump sum or income s ar. Include members for whom no contributions were received. Report deceased memb	
MEMBER 3 Title: Mr Mrs Miss Family name	Ms Other	
First given name	Other given names	
Member's TFN	Day Month Year Date of birth	
Contributions	OPENING ACCOUNT BALANCE \$	7
Include contributions reported to you on a <i>Rollover benefits statement</i>	Employer contributions A \$	
(RBS) (NAT 70944).	ABN of principal employer A1	
	Personal contributions B \$	
CC	GT small business retirement exemption C \$	
CGT sm	nall business 15-year exemption amount D \$	
	Personal injury election E\$	
	Spouse and child contributions F \$	
	Other family and friend contributions G \$	
Directed terr	mination (taxable component) payments H\$	
Assessat	ble foreign superannuation fund amount 📔 💲	
Non-assessab	ble foreign superannuation fund amount $ extbf{J}$	
Tra	ansfer from reserve: assessable amount K\$	
Transfe	er from reserve: non-assessable amount L\$	
Any other contribut	itions (including Super Co-contributions) M \$	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses O \$	Loss
components reported at N from amounts reported at P .	Inward rollover amounts P\$	
If P is negative, transfer the loss to O .	Outward rollover amounts Q\$	Code
	Benefit payments and code R \$	
	CLOSING ACCOUNT BALANCE S \$	7

Signature as prescribed in t	ax return Tax File Number	338MS2010
	at 30 June 2010 and former members who were paid a benefit (lump sum or r. Include members for whom no contributions were received. Report deceas	
MEMBER 4 Title: Mr Mrs Miss Family name	Ms Other	
First given name	Other given names	
Member's TFN	Day Month Date of birth	Year
Contributions	OPENING ACCOUNT BALANCE \$	
Include contributions reported to you on a Rollover benefits statement	Employer contributions A \$]
(RBS) (NAT 70944).	ABN of principal employer A1	
	Personal contributions B \$	
C	GT small business retirement exemption C	
CGT sm	all business 15-year exemption amount D \$	
	Personal injury election E \$	
	Spouse and child contributions F \$	
	Other family and friend contributions G \$	
Directed terr	nination (taxable component) payments H\$	
Assessa	ole foreign superannuation fund amount	
Non-assessa	ble foreign superannuation fund amount $ extbf{J}$	
Tr	ansfer from reserve: assessable amount K\$	
Transfe	er from reserve: non-assessable amount	
Any other contribu	tions (including Super Co-contributions) M\$	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses O \$	Loss
Exclude any rollover components reported at N	Inward rollover amounts P \$	
from amounts reported at P . If P is negative, transfer the	Outward rollover amounts Q \$	
loss to O .	Benefit payments and code R \$	Code
	CLOSING ACCOUNT BALANCE S \$	

		338MS2010
Signature as prescribed in	tax return Tax File Number	
Section G: Supple	ementary member information	
 Use this section for: deceased members any other members who can 	annot be included at pages 4 to 7.	
MEMBER 5		
Title: Mr Mrs Miss Family name	Ms Other	
First given name	Other given names	
Member's TFN	Day Month Yei Date of birth / / Day Month Yei Day Month Yei	
• • • •	If deceased, date of death / /	
	OPENING ACCOUNT BALANCE \$	
Include contributions reported to you on a Rollover benefits statement (RBS) (NAT 70944).	Employer contributions A \$	
(100) (1141 70044).	ABN of principal employer A1	
	Personal contributions B \$	
C	GT small business retirement exemption C \$	
CGT sm	nall business 15-year exemption amount D \$	
	Personal injury election E \$	
	Spouse and child contributions F \$	
	Other family and friend contributions G \$	
Directed ten	mination (taxable component) payments $$ H $$ $$	
	ble foreign superannuation fund amount	
	ble foreign superannuation fund amount J \$	
	ransfer from reserve: assessable amount K \$	
	er from reserve: non-assessable amount	
Any other contribu	utions (including Super Co-contributions) M \$	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses O \$	Loss
Exclude any rollover components reported at N	Inward rollover amounts P \$	
from amounts reported at P . If P is negative, transfer the	- ·	
loss to O .	Outward rollover amounts Q \$	Code
	Benefit payments and code R \$	
	CLOSING ACCOUNT BALANCE S \$	

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Signaturo as prosprihod i	tax ratura				Tax Eila Number	338MS2010
Signature as prescribed in	i tax return				Tax File Number	
 Use this section for: deceased members 			7			
■ any other members who c	annot be incil	Jded at pages 4 to	7.			
MEMBER 6						
Title: Mr Mrs Miss Family name	Ms Oth	er				
First given name		Other giv	en names			
					Day Month Year	
Member's TFN			Date of	birth	Day Month Year	
		If deceased,	date of o	death	/ /	
Contributions	OPEN	IING ACCOUNT BA	ALANCE	\$		
Include contributions reported to you on a <i>Rollover benefits statement</i>		Employer contr	ibutions	A \$		
(RBS) (NAT 70944).	ABN of princ	cipal employer A1				
		Personal contr	ibutions	в\$		
C	GT small bus	iness retirement exe	emption	c \$		
CGT sr	mall business	15-year exemption	amount	D \$		
		Personal injury	election	Е\$		
	Spo	use and child contr	ibutions	F\$		
	Other fan	nily and friend contr	ibutions	G \$		
Directed te	rmination (taxa	able component) pa	ayments	Н\$		
Assessa	able foreign su	perannuation fund	amount	I\$		
Non-assessa	able foreign su	perannuation fund	amount	J\$		
Т	ransfer from r	eserve: assessable	amount	К\$		
Trans	fer from reserv	ve: non-assessable	amount	L \$		
Any other contrib	utions (includi	ng Super Co-contri	butions)	м\$		
		TOTAL CONTRIBL	JTIONS	N \$		
Other transactions		ated earnings or lo	sses O	\$		Loss
Exclude any rollover components reported at N		nward rollover amo		\$		
from amounts reported at P . If P is negative, transfer the	0ı	utward rollover amo	unts Q	\$		
loss to O .] Ben	efit payments and c	code R	\$		Code
	CLOSING	ACCOUNT BALA	NCE S	\$		
If additional memb	ers need to be	e reported in Sectio	on G: Sur	opleme	entary member information co	ppy this page

					338M	IS2010
Signature as prescribed in tax retui	m		1	Γax File Number		
Section H: Assets and li	abilities					
14 ASSETS 14a Australian managed investments	Listed trusts	A	\$			
	Unlisted trusts	в	\$			
	Insurance policy	С	\$			
	Other managed investments	D	\$			
14b Australian direct investments	Cash and term deposits	Е	\$			
	Debt securities	F	\$			
	Loans	G	\$			
	Listed shares	н	\$			
	Unlisted shares	I	\$			
D	erivatives and instalment warrants	J	\$			
	Non-residential real property	K	\$			
	Residential real property	L	\$			
Ari	twork, collectibles, metal or jewels	Μ	\$			
	Other assets	0	\$			
14c Overseas direct investments	Overseas shares	Ρ	\$			
Ove	rseas non-residential real property	Q	\$			
	Overseas residential real property	R	\$			
	Overseas managed investments	S	\$			
	Other overseas assets	Т	\$			
TOTAL AUSTRA	LIAN AND OVERSEAS ASSETS	U	\$			
15 LIABILITIES	Borrowings	V	\$			
Total r (total of all CLOSING ACCOUNT B	nember closing account balances ALANCEs from Sections F and G)	W	\$			
	Reserve accounts	X	\$			
	Other liabilities	Y	\$			
	TOTAL LIABILITIES	Z	\$			
Section I: Taxation of fin	ancial arrangemer	nts	5			
16 Taxation of financial arrangeme Did you make a gain, loss or tra from a financial arrangeme	nsitional balancing adjustment	No		Yes		
	Total TOFA gains	\$				
	Total TOFA losses	\$				1.00-
TOFA tran	sitional balancing adjustment $ { m J} $	\$				Loss
2aga 10						

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Signature as prescribed in tax return Tax File Number

Section J: Regulatory information

The following questions indicate the operational status of the SMSF. Penalties will apply for false or misleading information. You must answer either **No** or **Yes** for all questions listed and provide dollar amounts if applicable.

In-house and related party assets

			in-nouse and related party assets
\$ Yes	No	A	Did the SMSF loan, lease to or invest in related parties (known as in-house assets)?
Yes	No	В	Did the SMSF hold in-house assets at any time during the year that exceeded 5% of total assets?
\$ Yes	No	С	Did the SMSF hold an investment in a related party at any time during the year (excluding in-house assets)?
\$ Yes	No	D	Did the SMSF acquire any assets (other than exempt assets) from related parties?
			Other regulatory questions
Yes	No	Е	Did the SMSF lend money or provide financial assistance to a member or relative of a member of the fund?
\$ Yes	No	F	Did the SMSF receive in specie contributions during the year?
Yes	No	G	Did the SMSF make and maintain all investments on an arm's length basis?
Yes	No	н	Did the SMSF borrow for purposes that are not permissible?
Yes	No	I	Did members have the personal use of the SMSF's assets before retirement?
Yes	No	J	Did the SMSF provide money to members without a condition of release being met?
Yes	No	Κ	Did trustees of the fund receive any remuneration for their services as a trustee?
Yes	No	L	Are any trustees or directors currently disqualified persons as defined by SISA?
Yes	No	Μ	Are all SMSF assets appropriately documented as owned by the fund?
Yes	No	Ν	Did the SMSF carry on a business of selling goods or services?
Yes	No	0	Does the auditor provide services to the SMSF as either a tax agent, accountant or financial advisor or administrator?

Section K: Other information

Forestry managed investment schemes		Code		Year		Number
Product or private ruling information	G		н		/ I	

Family trust election status

If the trust or fund has made, or is making, a family trust election, write the four-digit income year specified of the election (for example, for the 2009–10 income year, write 2010).	A
If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the <i>Family trust election, revocation or variation 2010.</i>	В
Interposed entity election status	
If the trust or fund has an existing election, write the earliest income year specified. If the trust or fund is making one or more elections this year, write the earliest income year being	

specified and complete an Interposed entity election or revocation 2010 for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2010*.

Tax File Number

		าร									
Section L: Decl	aration										
Penalties may be im	oosed for fa	alse or misl	leading infor	rmation in add	dition to penal	ties relating	g to ar	ny tax	k short	falls.	
TRUSTEE'S OR DIREC I declare that current truste I have received the audit re nominated bank account (i Authorised trustee's or dire	es and dire port and I a f applicable)	ctors have m aware c).	authorised								
						Date	Day	/	Month	/	Year
Preferred trustee or d	rector co	ntact de	tails:								
Title: Mr Mrs Miss Family name	s Ms	Other									
First given name			Other	r given names							
Phone number											
Email address											
Non-individual trustee nam											
	e (if applica	ble)									
ABN of non-individual trust		ble)									
		ble)				Hrs]			
	ee	·	are and con	nplete this anr	nual return	Hrs					
	ee Time take	en to prepa	of the Aust	ralian Busines	s Register, ma	ay use the					
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAN I declare that the Self-mana by the trustees, that the tru	ee Time take Taxation, as al return to r RATION: nged supera stees have	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o <i>und annual i</i> a declaration	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation,	refer to	o the	instrue	ctions.	n provided
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAN I declare that the <i>Self-mana</i> by the trustees, that the tru the trustees have authorise	ee Time take Taxation, as al return to r RATION: nged supera stees have	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o <i>und annual i</i> a declaration	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation,	refer to	o the	instrue	ctions.	n provided
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAN I declare that the <i>Self-mana</i> by the trustees, that the tru the trustees have authorise	ee Time take Taxation, as al return to r RATION: nged supera stees have	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o <i>und annual i</i> a declaration	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation,	refer to	o the	instrue	ctions.	n provided
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAI I declare that the Self-mana by the trustees, that the tru the trustees have authorise Tax agent's signature	ee Time take Taxation, as al return to r RATION: aged supera stees have d me to lode	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o <i>und annual i</i> a declaration	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation, ared in acc provided	ordane to me	o the	instru	ctions.	n provided st, and that
ABN of non-individual trust	ee Time take Taxation, as al return to r RATION: ged supera stees have d me to lode	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o <i>und annual i</i> a declaration	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation, ared in acc provided	ordane to me	o the	instru	ctions.	n provided st, and that
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAN I declare that the Self-mana by the trustees, that the tru the trustees have authorise Tax agent's signature Tax agent's contact de Title: Mr Mrs Miss Family name	ee Time take Taxation, as al return to r RATION: ged supera stees have d me to lode	en to prepa s Registrar maintain th <i>innuation fi</i> given me a ge this anr	of the Aust integrity o	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation, ared in acc provided	ordane to me	o the	instru	ctions.	n provided st, and that
ABN of non-individual trust The Commissioner of you provide on this annual TAX AGENT'S DECLAN I declare that the Self-mana by the trustees, that the tru the trustees have authorise Tax agent's signature Tax agent's contact de Title: Mr Mrs Miss	ee Time take Taxation, as al return to r RATION: ged supera stees have d me to lode	en to prepa s Registrar maintain th <i>innuation fi</i> given me a ge this anr	of the Aust integrity o	ralian Busines f the register. return 2010 h n stating that t	ss Register, ma For further inf as been prepa	ay use the ormation, ared in acc provided	ordane to me	o the	instru	ctions.	n provided st, and that

Postal address for annual returns: Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY

PART A

Electronic Lodgement Declaration (Form MS)

This declaration is to be completed where the return is to be lodged via the Tax Office's Electronic Lodgment Service (ELS). It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so.

Privacy

Your tax file number

It is not an offence not to quote your (or if applicable, the partner's or beneficiary's) tax file number (TFN). However, you cannot lodge your income tax return electronically if you do not quote your TFN. The Tax Office is authorised by the Income Tax Assessment Act 1936 and the Income Tax Assessment Act 1997 to ask for information in this tax return.

The Australian Business Register

The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register.

Please refer to the privacy statement on the Australian Business Register (ABR) website (www.abr.gov.au) for further information – it outlines our commitment to safeguarding your details.

Tax File Number

Name of Partnership, Trust, Fund or Entity

Year

I authorise my tax agent to electronically transmit this tax return via the Electronic Lodgment Service.

Important

Before making this declaration please check to ensure that all income has been disclosed and the tax return 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 Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns.

Declaration: I declare that:

- the current trustee and directors have authorised this return and it is documented as such in the Self Managed Superannuation Fund's record
- I have received the audit report and I am aware of any matters raised
- the agent is authorised to lodge this annual return, including any applicable schedules

Signature of Partner, Trustee or Public Officer	Date	1	/	

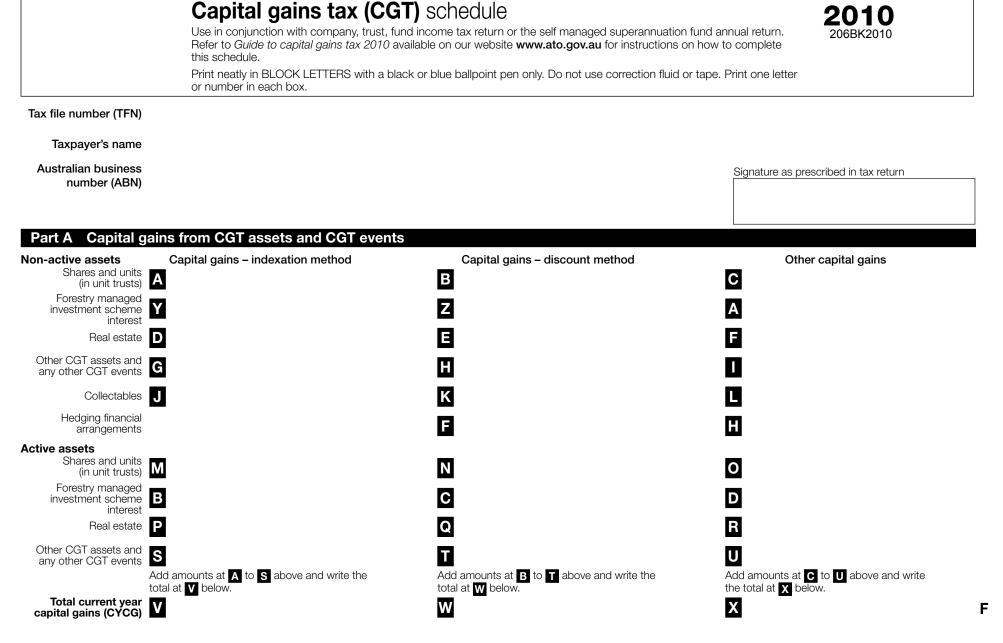
PART C

Tax Agent's Certificate (Shared facility users only)

I declare that:

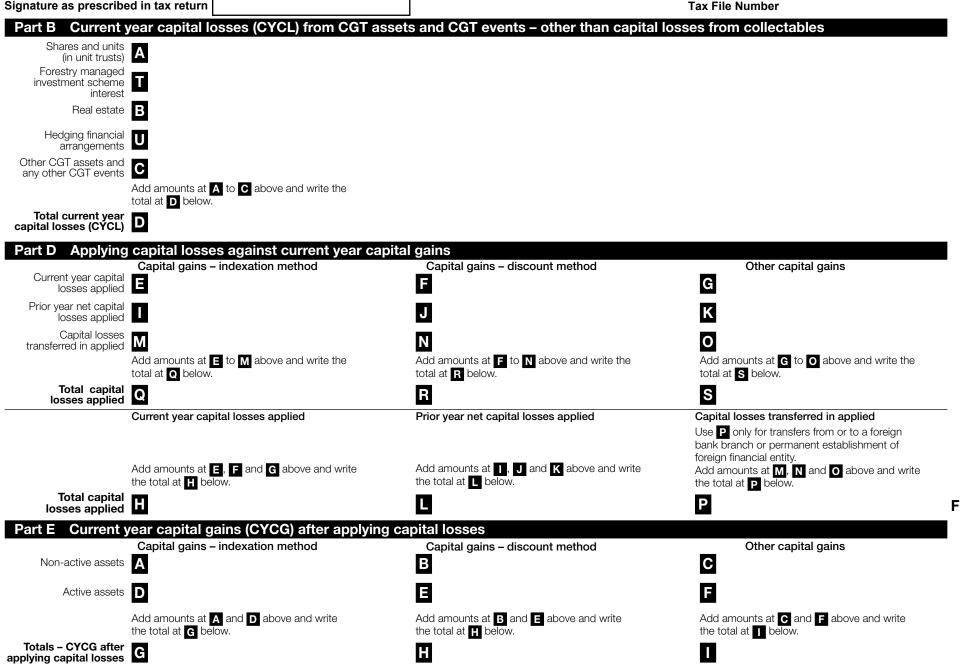
- I have prepared this tax return in accordance with the information supplied by the trustees
- I have received a declaration from the trustees stating that the information provided to me is true and correct
- I am authorised by the trustees to lodge this annual return, including any applicable schedules

Agent's signature	Date	/	1	Reference
Contact name				
Agent's Phone No				Agent Ref No

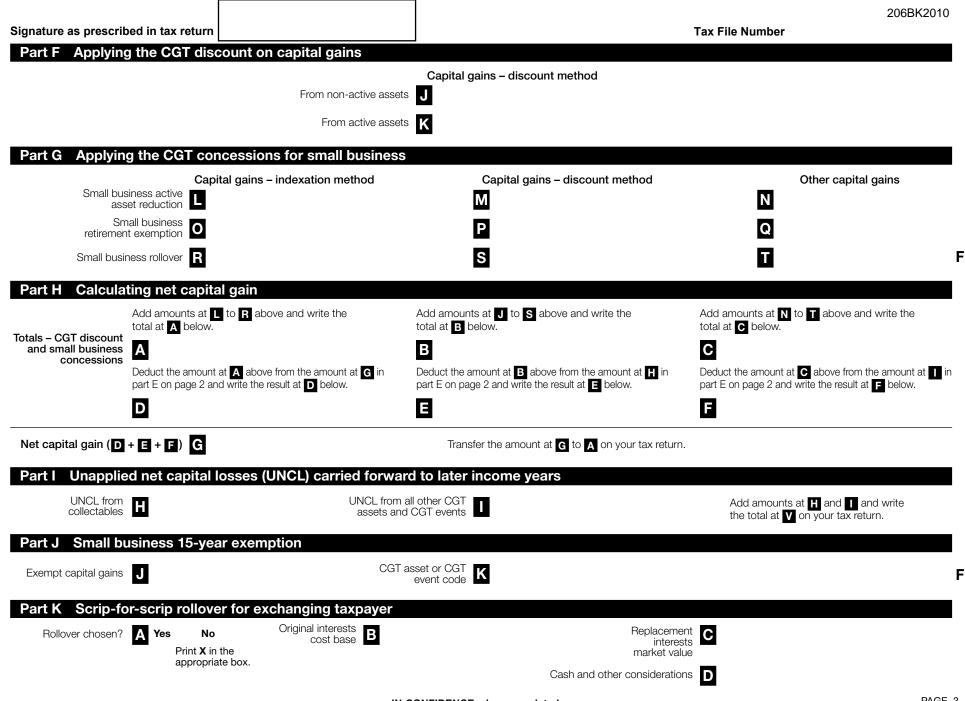


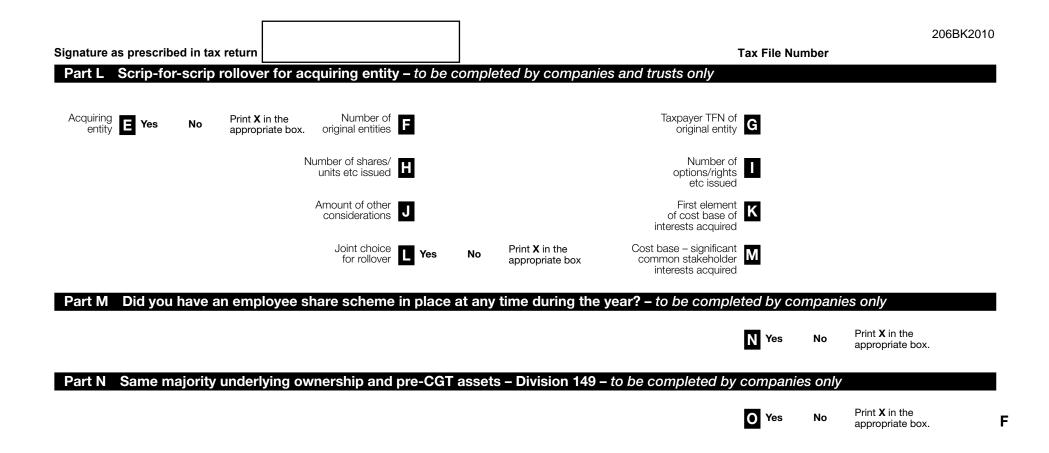
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Signature as prescribed in tax return



IN-CONFIDENCE-when completed



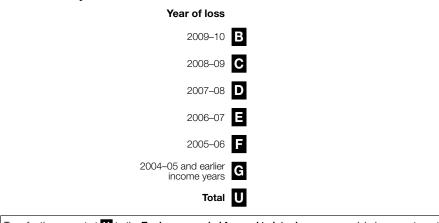


Losses schedule	2010
Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2010 tax return.	836BP2010
Superannuation funds should complete and attach this schedule to their 2010 tax return.	
Print neatly in BLOCK LETTERS with a black or blue ballpoint pen only. Print one letter or number in each box. Do not use correction fluid or tape.	
Refer to <i>Losses schedule instructions 2010</i> , available on our website www.ato.gov.au for instructions on how to complete this schedule.	
ax file number (TFN)	
lame of entity	

Australian business number (ABN)

Part A Losses carried forward to the 2010-11 income year - excludes film losses

1 Tax losses carried forward to later income years



Signature as prescribed in tax return

Transfer the amount at **U** to the **Tax losses carried forward to later income years** label on your tax return.

2 Net capital losses carried forward to later income years

Year of loss	
2009–10	
2008–09	
2007–08 J	
2006–07 K	
2005–06	
2004–05 and earlier M	
Total V	F
Transfer the amount at V to the Net capital losses carried forward to later income years label on your tax return.]

					836BP2010
Si	gnature as prescribed in tax return		Tax File I	Number	
	Part B Ownership and same bu	siness test – company and listed wid	ely held trus	t only	
s: D	omplete item 3 of Part B if a loss is beir atisfied in relation to that loss. o not complete items 1 , 2 or 4 of Part B ase of companies, losses have not been	if, in the 2009–10 income year, no lo			
1	Whether continuity of majority ownership test passed	Year of loss	_		Print X in the
	Note: If the entity has deducted, transferred]	A Yes B Yes	No No	appropriate box. Print X in the
	in or transferred out (as applicable) in the 2009–10 income year a loss incurred in any of the listed years, print X in the Yes		C Yes	No	appropriate box. Print X in the
	or No box to indicate whether the entity has satisfied the continuity of majority		D Yes	No	appropriate box. Print X in the appropriate box.
	ownership test in respect of that loss.	2005–06	E Yes	No	Print X in the appropriate box.
		2004–05 and earlier income years		No	Print X in the appropriate box.
2	Amount of losses deducted for whi business test is satisfied – excludes fi		nership te	st is not	passed but the same
		Tax losses	G		
		Net capital losses	H		
3	Losses carried forward for which the years – excludes film losses	ne same business test must be s Tax losses	-	efore th	ey can be deducted in later
		Net capital losses	J		
4	Do current year loss provisions app Is the company required to calculate its to the year under Subdivision 165-B or its net for the year under Subdivision 165-CB of the 1997 (ITAA 1997)?	axable income or tax loss for capital gain or net capital loss	K Yes	No	Print X in the appropriate box.
	Part C Unrealised losses - compa	ny only			
	Note: These questions relate to the operation				
	Has a changeover time occurred in relation after 1.00pm by legal time in the Australian 11 November 1999?		Yes	No	Print X in the appropriate box.
	If you printed X in the No box at I , do not c	omplete M, N or O.			
	At the changeover time did the company sanet asset value test under section 152-15 c	,	M Yes	No	Print X in the appropriate box.
	If you printed X in the No box at M , has the determined it had an unrealised net loss at the second s		N Yes	No	Print X in the appropriate box.
	If you printed X in the Yes box at N , what unrealised net loss calculated under section		0		
	Part D Life insurance companie	s			
		erannuation/FHSA class tax losses carriec forward to later income years			
	Complying super	rannuation/FHSA net capital losses carried forward to later income years			F

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gnature as prescribed in tax return	Т	ax File Number
Part E Foreign source losses		
substituted accounting period.	nt forward from earlier income years that we	lete this item only if the entity uses an early are incurred for the 1999–2000 to 2008–09 income
Note: Complete this item only if this is your first income year starting after 1 July 2008. Do not complete this item if you completed		e A
it in the 2008–09 income year.	Modified passive incom	e B
	Offshore banking incom	e C
All other foreign source income		
Less – Loss amount attributable to non-assessable non-exempt income – Companies only		
	Subtract E from	
	Total of A + B + C + F	G
Include at H	50% of losses at G that were incurred for th 1999–2000 to 2001–2002 income year	es H
	unt of convertible foreign losses reduced when noice made to limit the starting total to \$10,00	e
St	arting total for convertible foreign losses equa label G less labels H and	J
Foreign loss component of a tax lo	OSS – excludes losses of CFCs	
Foreign loss comp	oonent of tax losses deducted – included at th Tax losses deducted label on your tax retur	e K
	t of tax losses carried forward – included at th to later income years label on your tax retur	
Controlled foreign company losse	S	_
	Convertible CFC losse	s M
	CFC losses deducte	d N
	CFC losses carried forwar	d O

