



Family trust election, revocation or variation

2019

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

Tax file number (TFN)
of the trust

To make, revoke or vary a family trust election in accordance with section 272-80 of Schedule 2F to the *Income Tax Assessment Act 1936* (ITAA 1936), you must complete items **1** and **2**, item **3** if it applies and the declaration on page 4. You must also complete section **A** for an **election**, or section **B** for a **revocation**. For a **variation** items **6** or **7** and item **8** in section **A** must be completed. 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 an election, a revocation or a variation? Print **E** for election, **R** for revocation or **V** for variation.

2 Full name and current postal address (including country – if outside Australia) of trust for which the family trust election, revocation or variation is made.

Full name of the trust

Current postal address of the trust

Suburb or town State Postcode
Country – if not Australia

3 If the name and/or the postal address for the trust 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 trust as shown on last notice of assessment or last tax return lodged

Postal address of the trust as shown on last notice of assessment or last tax return lodged

Suburb or town State Postcode
Country – if not Australia

Section A: Family trust election or variation details

4 Was the central management and control of the trust outside Australia at any time during the period from the election commencement time (see items 6 and 7) 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) at which central management and control was outside Australia. Full period

Print **F** in the box if the central management and control of the trust was outside Australia at all times during the relevant period **OR** specify the time(s) during the relevant period at which central management and control of the trust was outside Australia.

If more than two time periods are to be specified, attach a separate sheet of paper with details of the additional time periods.
from Day Month Year to Day Month Year
from Day Month Year to Day Month Year

5 Full name, TFN, current postal address and residency details of every trustee of the trust from the election commencement time until the time the election is made (relevant period). Where any trustee is a company, the Australian company number (ACN) or Australian registered body number (ARBN) of each such trustee is also required.

If there was more than one trustee of the trust during the relevant period, attach a separate sheet of paper with all the information required for each additional trustee.

TFN of trustee See the Privacy note in the Declaration.

OR

Print **X** in the box if the trustee does not have a TFN.

If the trustee is an individual

Title – for example, Mr, Mrs, Ms, Miss

Surname or family name

Given names

If the trustee is a company

Name

ACN/ARBN* *Cross out whichever is not applicable.

Current postal address of the trustee

Suburb or town

State

Postcode

Country – if not Australia

At any time during the relevant period was the trustee a non-resident for tax purposes?

Print **Y** for yes or **N** for no.

If you printed **Y**, specify the time(s) at which the trustee was a non-resident for tax purposes.

Print **F** in the box if the trustee 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 was a non-resident for tax purposes.

Day	Month	Year	to	Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>

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.

6 Where making a family trust election – write the four-digit, 2005 or later, income year specified for the purposes of the family trust election. Where varying the specified individual of a family trust election, other than by way of an order, an agreement or an award (see item 7) – write the four-digit, 2019 income year of the trust's return of income with which the variation must be lodged. The variation effective date is the first day of that year of income or the commencement date of the original election, whichever is later.

If the income year specified does not end on 30 June, state the substituted accounting period for that income year.

Income year specified

from

Substituted accounting period

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

to

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

7 The commencement time for the family trust election or the effective date of a variation by way of an order, an agreement or an award.

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Note: Only complete this item if:

- specifying the 2018–19 income year for an election and the family control test in section 272–87 of Schedule 2F to the ITAA 1936 has **NOT** been satisfied at all times during the 2018–19 income year. In these circumstances, the election commencement time will be the earliest time from which the family control test was passed continuously until the end of the 2018–19 income year. In all other circumstances the election commencement time is the first day of the income year specified in item 6 of Section A, or
- varying the specified individual of a family trust election under subsection 272–80(5C) of Schedule 2F to the ITAA 1936 as a result of an order, an agreement, or an award. The variation effective date is the variation date specified by the order, agreement or award.

8 Full name, TFN, date of birth and current address of principal place of residence (including country – if outside Australia) of the individual (specified individual) whose family group is taken into account in relation to the family trust election.

Note: Only one individual can be specified.

TFN of the specified individual **OR** Print **X** in the box if the specified individual does not have a TFN.

See the Privacy note in the Declaration.

Title – for example, Mr, Mrs, Ms, Miss

Full name of the specified individual

Date of birth of the specified individual Day Month Year

Surname or family name

Given names

Current address of principal place of residence of the specified individual

Suburb or town State Postcode

Country – if not Australia

Note: Only complete section B if revoking a family trust election otherwise go to Declaration on page 4.

Section B: Family trust revocation

9a The later time under paragraph 272-80(6)(b) of Schedule 2F to the ITAA 1936 from which the family trust election referred to in items 10 and 11 ceases to be in force Day Month Year

OR

9b The income year from which the revocation is to be effective under subsection 272-80(8). Income year

10 The income year for which the details of the election being revoked were included in the tax return for the trust or given to the Commissioner as required under subsection 272-80(2) of Schedule 2F to the ITAA 1936 or sub-items 22(4) or 22A(4) of Schedule 1 to the Taxation Laws Amendment (Trust Loss and Other Deductions) Act 1998. Income year

11 Specify the income year exactly as it appears in Section A of the relevant family trust election included in the tax return for the trust or given to the Commissioner for the income year identified, and the current TFN of the individual specified in that election.

Income year TFN of the specified individual **OR** Print **X** in the box if the **specified individual** does not have a TFN.

12 Full name, TFN and current postal address of any company, fund, partnership or trust which has an interposed entity election in force in respect of the trust and the specified individual identified in items 2 and 11. In the case of a company, also provide the ACN or ARBN.

TFN of the *company/fund/partnership/trust **OR** Print **X** in the box if the *company/fund/partnership/trust does not have a TFN.

Full name and ACN or ARBN of the *company/fund/partnership/trust

ACN/ARBN*

* Cross out whichever is not applicable

Current postal address of the *company/fund/partnership/trust

Suburb or town State Postcode

Country – if not Australia

* Cross out whichever is not applicable.

If there was more than one company, fund, partnership or trust which has an interposed entity election in force in respect of the trust and the specified individual identified in items 2 and 11, attach a separate sheet of paper with all the information required above for each additional company, fund, partnership or trust.

Declaration

Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of your tax file number (TFN). The ATO will use your TFN to identify you in our records. It is not an offence not to provide your TFN. However if you do not provide your TFN, the processing of this form could be delayed.

Taxation law authorises the ATO to collect information including personal information about the person authorised to sign the declaration. 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) is/are making, varying or revoking a family trust election, the details of which are set out above, for the purposes of section 272-80 of Schedule 2F to the ITAA 1936 and that the trustee(s) is/are able to make, vary or revoke the election in accordance with that section.

Full name of the trustee(s) at the time the family trust election is made or, where this form is being used to revoke a family trust election, the time the 2019 tax return is lodged with this form or this form is required to be given to the Commissioner.

Note: If section **A** is required to be completed, the name of the trustee(s) must be written exactly as it appears in item 5.

If the trustee is an individual

Title – for example, Mr, Mrs, Ms, Miss

Surname or family name

Given names

If the trustee is a company

Name

Signature of the trustee or, if the trustee is a company, the signature of the public officer of the corporate trustee

Date declaration made

Day	Month	Year

If there is more than one trustee of the trust at the time the family trust election is made or a family trust election is revoked or varied, attach a separate sheet of paper with the above details and signature for each additional trustee.

For more information, see the explanatory notes for the *Family trust election, revocation or variation 2019*.

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 should consider the time, rounded up to the nearest hour, which the trust (including the trustees) 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 in doing this, such as an employee of the business.
2. If this form is lodged with the 2019 tax return, the answer should be included in the time box provided on the tax return.