



ENVIRONMENTAL TRUST INCOME TAX RETURN

Do not use this area

- Complete this return for a qualifying environmental trust, as defined on the back of this return.
- File this return no later than 90 days after the end of the trust's taxation year.
- Send one completed T3M return with the required financial statements to the Ottawa Technology Centre, Ottawa ON K1A 1A2.
- We may impose penalties if this return is not filed on time. We charge interest at the prescribed rates on any amounts owing.

Name of trust			Account number T - -		
Name of trustee					
Mailing address of trustee				Telephone number ()	
				Postal code	
Province or territory of site				Taxation year	
Type of trust:					
Mining reclamation <input checked="" type="checkbox"/> 51 <input type="checkbox"/>		Waste disposal reclamation <input checked="" type="checkbox"/> 52 <input type="checkbox"/>		Quarry reclamation <input checked="" type="checkbox"/> 53 <input type="checkbox"/>	
Date trust created			If this is the final return of the trust, give the date the trust wound up or is planning to wind up.		
Year Month Day			Year Month Day		

1. Number of beneficiaries under the trust	_____
2. Total contributions to the trust during the year	_____
3. Total withdrawals from the trust during the year	_____

Income and tax payable	
Income subject to tax (attach financial statements)	295 _____ 1
Part XII.4 tax payable (line 1 _____ × 28%) =	175 _____ 2
Provincial tax payable (see Note) (line 1 _____ × % =	176 + _____ 3
Total tax payable (line 2 plus line 3)	190 = _____ 4
Instalments	010 - _____ 5
Balance due or refund (line 4 minus line 5)	090 = _____ 6
We do not charge or refund an amount of less than \$2.	
Amount enclosed	095 _____
(Attach a cheque or money order payable to the Receiver General. Do not mail cash.)	
Note: The British Columbia tax rate is 16.5%. The Saskatchewan tax rate is 17%. Use the chart on the back page for the Ontario tax rate.	

Certification			
I, _____, certify that the information given on this return and any documents attached is, to the best of my knowledge, correct and complete. (Please print)			
_____	_____	_____	_____
Date	Authorized person's signature	Position or title	Telephone number

