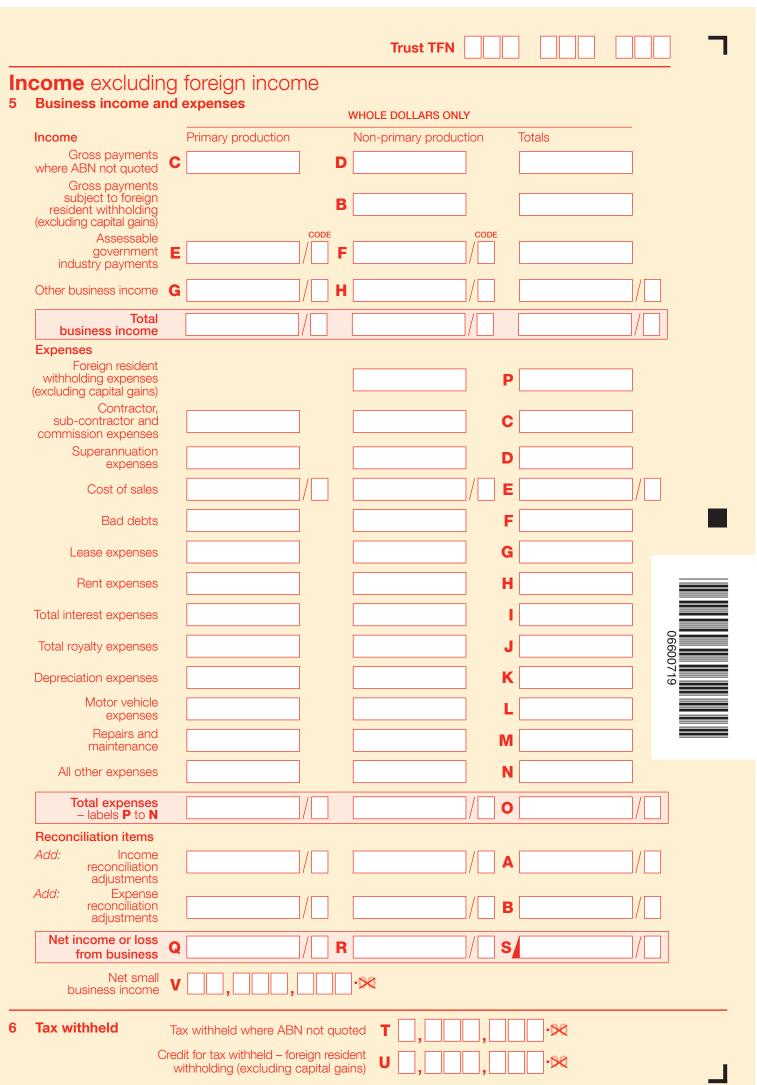
	)19 7
Day Month Year Day Month Year to Vear to Vear Vear or specify period if part year or approved substitute period.	
<ul> <li>Notes to help you prepare this tax return are provided in the <i>Trust tax return instructions 2019</i> (the instructions), available on our website ato.gov.au</li> <li>When completing this return</li> <li>Print clearly, using a black or blue pen.</li> <li>Use BLOCK LETTERS and print one character in each box.</li> <li>M ( T H S T )</li> <li>Place X in all applicable boxes.</li> </ul>	06600619
Trust information         Tax file number (TFN)         See the Privacy note in the Taxpayer's declaration.	Yes No
Australian business number (ABN)       Image: Comparison of the second sec	
Current postal address If the address has not changed, print it exactly as shown on the last notice of assessment or the last tax return loop	dged.
Suburb/town State/territory	Postcode
Country if outside Australia	
Postal address on previous tax return	
If the address has changed, print your previous address <b>exactly</b> as shown on the last notice of assessment or the last	
Suburb/town State/territory	

Г														
Full name of the trustee to whom notices should be sent														
If the trustee is an individual, print details here. Title: Mr Mrs Miss Ms Other Other														
First given name Other given names														
If the trustee is a company, print details here including ABN. Name														
ABN Phone number (include area code)  Daytime contact														
Image: Im														
Family trust election status         Interposed entity election status														
If the trustee has made, or is making, a family trust election, write the four-digit <b>income</b> <b>year specified</b> of the election (for example, for example, the trust election specified of the election specified of the election specified of the election (for example, the trust election specified of the election specified of the election specified of the election specified of the election (for example, the trust election specified of the election specified of the election specified of the election specified specified of the election (for example, the trust election specified of the election specified of the election specified specif														
year specified of the election (for example, for the 2018–19 income year write 2019).       more elections this year, write the earliest income year being specified and complete an Interposed entity election or revocation 2019 for each election														
If revoking or varying a family trust election, print <b>R</b> for revocation 2019 for each election. If revoking an interposed entity election, print <b>R</b> and pr														
complete and attach the Family trust election, complete and attach the Interposed entity election or														
revocation or variation 2019														
Type of trust       Print the code representing       Print X if also a charity														
Managed investment trusts														
If the trust is a managed investment trust, has the trustee made an election into capital account treatment? Yes No														
Is any tax payable by the trustee? Yes No Final tax return Yes No														
Electronic funds transfer (EFT)														
We need your financial institution details to pay any refund owing to you, even if you have provided them to us before.														
Write the BSB number, account number and account name below. (See relevant instructions.)														
BSB number (must be six digits)														
1 Description of main business activity														
Industry code A														
2 Status of business – print X at label <b>B1</b> , B2 or B3, whichever is the first applicable option, or leave blank.														
Multiple business <b>B1</b> Ceased business <b>B2</b> Commenced business <b>B3</b>														
Consolidation status – print X at label Z2 if applicable Consolidated subsidiary member Z2														
Entity status – print X at label G1 if applicable Significant global entity G1														
4 Did you sell any goods or services using the internet? Q Yes No														
Page 2 Sensitive (when completed) TRUST TAX RETURN 2019														



Г	7 Credit for interest on ea	arly payments	
	- amount of interest		
8	Partnerships and trusts Primary production		
	Distribution from partnerships		
	Share of net income from trusts		
	Deductions relating to amounts shown at <b>A</b> and <b>Z</b>		
	Non-primary production	Net primary production an	mount ▲, , , , ,
	Distribution from partnerships, less foreign income		·» /
	Share of net income from trusts, less capital gains, foreign income and franked distributions		·» /
	Deductions relating to amounts shown at <b>B</b> and <b>R</b>		∞
	Franked distributions from trusts		·∞
	Deductions relating to franked distributions from trusts in label <b>F</b>		
		Net non-primary production an	mount,,,,,,,,
	Capital gains from another trust ar Amounts of foreign income must b		o be included at item <b>21</b> .
	Share of credits from income Share of credit for tax withheld where ABN not quoted C		·∞
	Share of franking credits from franked distributions		
	Share of credit for TFN amounts withheld from interest, dividends and unit trust distributions		
	edit for TFN amounts withheld from oayments from closely held trusts		
	Share of credit for tax withheld – foreign resident withholding (excluding capital gains)		∞
9	Rent Gross ren	t <b>F</b>	·%
	Interest deductions	G,,,	•%
	Capital works deductions	x,,	·%
	Other rental deductions	• H , , ,	×
		Ne	
10	Forestry managed investmer	it scheme income	Q,,, %
11	Gross interest – including Aust	tralian Government loan interes	st J
	TFN amounts withheld		

		TFN amounts withheld from gross interest			
12	Dividends		Unfranked amount	К	_,∞
			Franked amount	L	_,∞
			Franking credit	M	_,∞
L		TFN amounts withheld from dividends	N,,		
_	Page 4		Sensitive (when completed)		TRUST TAX RETURN 2019

	Trust TFN
13	Superannuation lump sums and employment termination payments   Death benefit employment termination payment   where the beneficiary is a dependant     Taxable component   Taxable component   Y   Y
14	Other Australian income – give details   Type of income     Type of income     • • • • • • • • • • • • • • • • • • •
15	Total of items 5 to 14         Add the boxes.
De	eductions
16	Deductions relating to:       Australian investment income       P
	Deductions relating to franked distributions should <b>not</b> include deductions included at <b>G</b> item <b>8</b> .
47	
17	Forestry managed investment scheme deduction   D   ,   ,   ,   .
	Forestry managed investment scheme deduction     D        Other deductions – show only deductions not claimable at any other item     Name of each item of deduction     Amount     , , , , , , , , , , , , , , , , , , ,
	Other deductions – show only deductions not claimable at any other item Name of each item of deduction Amount
18	Other deductions - show only deductions not claimable at any other item     Name of each item of deduction     Amount     , , , , , , , , , , , , , , , , , , ,
18	Other deductions - show only deductions not claimable at any other item     Name of each item of deduction     Amount     Image: Image
18	Other deductions - show only deductions not claimable at any other item     Name of each item of deduction     Amount     , , , , , , , , , , , , , , , , , , ,
18 19 20	Other deductions - show only deductions not claimable at any other item     Name of each item of deduction     Amount     , , , , , , , , , , , , , , , , , , ,

I	
Fc	preign income
22	Attributed foreign income         Did you have overseas branch         operations or a direct or indirect         interest in a foreign trust, foreign         company, controlled foreign entity         or transferor trust?         If you answered Yes at label S, complete and attach an International dealings schedule 2019.         If you need to complete a Losses schedule 2019?
23	Other assessable foreign source income - other than income shown at item 22 Gross <b>B</b> , <b>D</b> , <b>D</b> , <b>D</b> , <b>D</b> , <b>N</b> et <b>V</b> , <b>D</b> , <b>D</b> , <b>D</b> , <b>N</b> et <b>V</b> , <b>D</b> , <b>D</b> , <b>D</b> , <b>N</b> et <b>V</b> , <b>D</b> , <b>D</b> , <b>D</b> , <b>N</b> et <b>V</b> , <b>D</b> , <b>D</b> , <b>D</b> , <b>D</b> , <b>N</b> et <b>V</b> , <b>D</b>
	Also include at label D Australian franking credits from a New Zealand franking company that you have received indirectly through a partnership or trust.
24	Total of items 20 to 23         Add the boxes
25	Tax losses deducted C , , , , , , , , , , , , , , , , , ,
26	Total net income or loss     Subtract item 25 from item 24.
27	Losses information         A Losses schedule 2019 must also be completed and attached if the sum of labels U and V is greater than \$100,000 or if the trust is a listed widely held trust and failed the majority ownership test for a loss.         Net capital losses carried forward to later income years         V       ,         ,
28	Landcare and water facility tax offset tax offset       Landcare and water facility tax offset         brought forward from prior years       G
0	versees transactions ( this conitalization
29	Verseas transactions / thin capitalisation         Overseas transactions         Was the aggregate amount of your transactions or dealings with international related parties (including the value of any property/service transferred or the balance of any loans) greater than \$2 million?       W Yes       No
	Did the thin capitalisation provisions affect you? O Yes No
	Royalty expenses overseas E , , , , , , , , , , , , , , , , , ,
	If you answered <b>Yes</b> at label <b>W</b> or <b>O</b> or completed <b>D</b> or <b>E</b> , complete and attach the <i>International dealings schedule 2019.</i>
	Was any beneficiary who was not a resident of Australia at any time during the income year, 'presently entitled' to a share of the income of the trust?
	If you answered <b>Yes</b> at label <b>A</b> , attach the information requested in the instructions.

		Trust TFN	- <b>-</b>
	instructions, any funds or p Do you have the ability or e	y send to, or receive from, one of the countries specified in the property or expectation to control, whether directly or indirectly, the disposition of any nvestments located in, or located elsewhere but controlled or managed	No No
	at item Total amount of deducti included at item 5 Did you satisfy th respect o you hold a personal services	e an individual's N Yes No s income (PSI)? N Yes No of PSI included 5 income labels A , , , , , , , , , , , , , , , , , ,	
	determination in respect o For any individual for whon source of their PSI income	f any individual?       D       Yes       No         n you did not satisfy the results test or hold a PSB determination, and each yielded less than 80% of their total PSI, indicate if you satisfied any of the business tests – print X in the appropriate box(es).         Employment test       E2       Business premises test	
	<b>Xation of finan</b> Taxation of financial a	cial arrangements   rrangements (TOFA)     Total TOFA gains   M	
Ke	ey financial info	rmation	
32	All current assets	F,,,,,, ∞	
33	Total assets	G,,,,∞	
34	All current liabilities	।,,,∞	
35	Total liabilities	J,,,, ∞	
			06600919

# Business and professional items

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		Business address of main business																		][ 						」 														]						
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39	Purchases and other costs B													-	Ж	1						SSC SSC					'SO	ns	Μ		·X															
	other costs																	со	DE		45		ring				fit			_																
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49	Small business entity simplified depreciation
	Deduction for certain assets 🗛 🔤 🚬 🔤 🔤 🕬
	Deduction for general small business pool <b>B</b>
50	National rental affordability scheme       National rental affordability scheme tax offset entitlement       F       ,       .
51	Other refundable tax offsets G , , , , , , , , , , , , , , , , , ,
52	Non-refundable carry forward tax offsets
	Early stage venture capital limited partnership tax offset
	Early stage investor tax offset
53	Medicare levy reduction or exemption
	Spouse's 2018–19 taxable income – if nil write '0' A , , , , , , , , , , , , , , , , , ,
	Number of dependent children and students     B     Half Medicare levy exemption – number of days
	Medicare levy surcharge and private health insurance tax offset If the trust is liable for the Medicare levy surcharge or entitled to the private health insurance tax offset, refer to the instructions.
54	Income of the trust estate A,,,,,, N

# **Statement of distribution**

### 55 Statement of distribution

#### **Distribution details**

Complete the distribution details on the following pages for **BENEFICIARY 1** to **5** if required, and for **Income to which no beneficiary is presently entitled and in which no beneficiary has an indefeasible vested interest, and the trustee's share of credit for tax deducted, if it applies.** 

If there are more than five beneficiaries see the instructions for more information.

**Note**: It is not an offence not to quote a TFN for a beneficiary. However, TFNs help the ATO to correctly identify each beneficiary's tax records. The ATO is authorised by the *Income Tax Assessment Act 1936* and the *Income Tax Assessment Act 1997* to ask for information in this tax return. We need this information to help administer the tax laws.

To make a correct Trustee Beneficiary (TB) statement you must quote the TFN of a resident trustee beneficiary of a closely held trust.

**Note**: If the trust needs to provide annual reports under the Trustee Beneficiary Rules or the TFN withholding rules you will be able to do so by completing the information in the statement of distribution.

55	Statement	of	distribution	- continued

BENEFICIA		Tax f	ile nu	ımbe	r (TF									ayer's				ntity	/ coc	de	<b>U</b> [						
		Mine		N -																							
Title: Mr Surname or fam	Mrs ily name	Miss		Ms		her																					
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First given name								]	Oth	er gi	ven	nam	nes														
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Page 1	10						S	en	siti	ve	(wh	en	cor	nple	eted	)							TRI	JST 1	TAX R	ETUF	N 2019

**Sensitive** (when completed)

# 55 Statement of distribution - continued

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55 Statement of distribution – continued									
BENEFICIARY 3 Tax file number (TFN)									
INDIVIDUAL NAME See the Privacy note in the Taxpayer's declaration.									
Title: Mr Mrs Miss Ms Other Other									
First given name Other given names									
OR									
NON-INDIVIDUAL NAME (company, partnership, trust etc.)									
Residential address for individuals or business address for non individuals									
Suburb/town									
Country if outside Australia (Australia only) (Australia only) (Australia only) (Australia only)									
Date of birth									
Assessment V Share of credit for TFN amounts withheld from powerste from the form									
Share of income of the trust estate W									
Share of credit for tax withheld Capital gains <b>F</b> • 🕅									
(excluding capital gains)									
Australian franking credits from a New Zealand franking company M M M M M M M M M M M M M M M M M M M									
Share of production foreign source income foreign source income /									
Credit for tax withheld C Share of National rental affordability scheme tax offset R									
Franked distributions U · M · M · M									
Franking credit <b>D</b> · Early stage venture capital limited partnership tax offset <b>T</b> ·									
TFN amounts withheld E · Early stage investor tax offset J ·									
Small business income tax offset information									
Share of net small business income Y									
Non-resident beneficiary additional information									
s98(3) assessable amount J									
TB statement information         For each trustee beneficiary, indicate whether you will be making a TB statement:       TB statement?       Yes       No									
Tax preferred amounts P · · · · · · · · · · · · · · · · · ·									
Distribution from ordinary or statutory income during income year <b>S . . N</b> Total TFN amounts withheld from payments <b>T . . N</b>									
Page 12 Sensitive (when completed) TRUST TAX RETURN 2015									

## 55 Statement of distribution – continued

BENEFICIA	RY 4	Та	ax f	ile ı	nun	ıbe	r (T	FN)														tity	code	e l	J [							
INDIVIDUAL	NAME				_	_	_		See	e th	e Pr	ivacy	/ not	e in	the	Taxp	aye	r's d	eclar	ratio	n.	_										
Title: Mr	Mrs	I	Miss	;	М	s	(	Other																								
Surname or fam	ily name	; ][]									]	1	][			][							ורדו									
First given name												Oth	ler g	 iven	nan	l nes																
											]																					
OR										L	1		][			][							]][									
NON-INDIVIE		NAN	/E	(coi	mpa	any,	, pa	rtne	ersh	nip,	, tru	ist e	etc.	)		)[	] [		1				) <b></b> ) r									
Residential a	ddres	s fo	r in	divi	idua	als	or b	ousi	nes	ss a	add	res	s fo	r no	on i	ndiv	vidu	Jals	;													
Suburb/town																									Stat	e/te	rrito	lL ry		Postc	_ L ode	
Country if outsid	le Austra	alia									][	1	][			1									(Aust	ralia	only)			(Aus	tralia	only)
	Day		Mc	onth				ear																								
Date of birth		] /			] /																											
	Ass	ess	mer	nt	•			_									Sh	are	of cr	edit	for	TFN	1									
	alculat	ion	coc	le	V													an	nour payı	nts v	with	helc								•		
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Share of credit					. [								٦,	80					Са	apit	al g	ains	s F							•04	1	
– foreign resic (excludin					L								,	×		Sh	are	of c	redi nt c	t foi anit	r for	eigr ains	ן ג Z									
Australian	frankin a New		redit	ts d								•9%	1				wi	thhe	oldir	ng a	imo	unte	3									
	nking o											~		LOSS		Attri	but	ed t	forei	ign	inco	ome	G							•>>		LOSS
Share of	[ pr	Pri odu	mai Ictic		<b>A</b> [							• 🕅				f	orei	Oth an s	her a sour	ass rce	essa inco	able	Η							->		
income	Nor	n-pri rodu			B							• 🛠		LOSS				-	ome												7	
Credit	for tax	with	he	ld ,	с [							·%				5	Shar	e of	f Nat	tion	al re	enta										
where A		1		e U									_	Exploration credits																		
Frank	ed dist	ribu	itior	าร	נו							•%	2	distributed ••••••••••••••••••••••••••••••••••••											•%							
	Franki	ng d	crec	dit	D							•			lin	niteo	d pa	age irtne	ershi	ip ta	ax o	ffse	t T							•		
TFN an	nounts	with	he	ld	E							•			Ear	ly s	tage	e in√	esto	or ta	ax o	ffse	t J							•		
Small business income tax offset information																																
Share of net	small b	ousi	nes	s in	con	ne	Y							۰Ø	Q																	
Non-residen	t bene	efic	iarv		dit	ion	al i	nfor	ma	atio	n																					
	3(3) ass													•Ø	٩		а	ISSE	essa	ble	s9 am	98(4 our	<sup>4)</sup> K							·Þ	2	
For each trust	For each trustee beneficiary, indicate whether you will be making a TB statement: <b>TB statement? Yes No</b>																															
	Tax pr	efer	red	am	our	its	Ρ							۰Ø	٩		S	l hare	Unta e of	net	d pa : inc	art o om	of Q							•Ø	٩	
Annual Trustee Payment report information																																
	ibution	fror	n or	rdin	ary	or	S							•Ø	٩	W	ithh	Tota eld	al TF fron	FN a n pa	amc aym	ount ient	s T							•0	٩	_
TRUST TAX RET	FURN 20	019								S	en	siti	ve	(wh	nen	COI	mp	lete	ed)										P	age <sup>-</sup>	13	

# 55 Statement of distribution – continued

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<b>BENEFICIARY</b> 5	Tax fil	e nur	nber	(TFN)											tity	code	U						
INDIVIDUAL NAME	I	_		1		he Pi	rivacy	note	e in th	e Taxp	ayer <sup>:</sup>	's dea I	clarati	ion.	-								
Title: Mr Mrs Surname or family name	Miss	N	/Is	Other																			
First given name							Oth	er giv	/en na	ames													
OR																							
NON-INDIVIDUAL	NAME (d	comp	any, I	partne	ershi	o, tr	ust e	etc.)			1				ı	) ——) —			-) () (				
Residential addres	s for inc	lividu	als o	r busi	ness	ado	Iress	for	non	indi	vidu	als			ı	,							
Suburb/town																]	St	ate/t	erritor	У	Po	stcode	э ПП
Country if outside Austr	alia																(A	ustralia	a only)			(Australia	a only)
Date of birth	Mon	th		Year																			
Ass	sessmen	t 🗤									Sh	nare	of cre	edit fo	or TF	-N							
	tion code							_			fi	rom	payn	ts wit nents	s fro	m 🖣						•	
of the tru	ust estate	<b>W</b>						J•Ø	R			clo	-	held								00	7
Share of credit for tax – foreign resident wi								۵-۵	R	0	I	. ( .		pital	-							•92	
(excluding capi										S	re	side	nt ca	for fo apital	gai	ns Z						•	
Australian frankir from a New franking	Zealand	I N					•90			Att				g am gn in								• <b>%</b>	_
Share p	Primary oductior						•90	:]/[			fore			sses ce in								•90	
of income   No	n-primary roductior	<b>B</b>					• <b>%</b>		OSS	Fo	reigr	n inc	ome	tax	offs	et						•	
Credit for tax where ABN no	withheld	C					•90	1	ć	afford				onal e tax			2					•	
Franked dis	tributions	• <b>U</b>					·%	1				Expl	orati	on c distril	redi oute	its ed N						·X	
Frank	ing credi	t D					•			Ea limite	irly s ed pa	tage artne	vent	ure c o tax	apit offs	tal et						•	
TFN amounts	withheld	E					•		E	arly s	tage	e inve	estor	tax	offs	et	J 🗌					•	
Small business in	Small business income tax offset information																						
Share of net small									•90														
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s98(3) ass	sessable	amoi	unt ,	J					•90		s9	8(4)	asse	essat	ole a	amou	Int	K					•90
<b>TB statement info</b> For each trustee ber			ate w	hether	you	will ł	oe m	akin	g a <sup>-</sup>	TB sta	atem	nent:			Т	B st	aten	nent	?	Ye	s		lo 🗌
Tax pr	eferred a	amour	nts	P					• <b>%</b>			;	l share	Jnta e of r	xed net	part incon	of ne	Q					-90
Annual Trustee Payment report information																							
	oution fro	m orc	dinary	or 👝						•90	],	withl				mour ymer		T					·X
Page 14						Ser	nsitiv	ve (	whe	n coi	mple	etec	)						TR	UST	rax f	ETUR	N 2019

**Sensitive** (when completed)

## 55 Statement of distribution - continued

Income to which no beneficiary is presently entitled and in which no beneficiary has an indefeasible vested interest, and the trustee's share of credit for tax deducted.

	Assessment				(	Capital gains	E	•%	
	calculation code Share of income					dit for foreign	•		
C	or the trust estate			•%	resident	capital gains	Z	•	
- foreign resi	it for tax withheld dent withholding ng capital gains)			]• <b>%</b>			G	·%	1.000
Australian	franking credits		20	1		r assessable urce income	H	·%	
	n a New Zealand anking company		•%	_	E terretere a				/
	Primary		-%		J	lational rental	•	-	
Share of income	production Non-primary			]/ [ LOSS	affordability sche		R	•	
	L production	D	•%		Sł refundabl	hare of other le tax offsets	X	•	
Credit where <i>i</i>	for tax withheld ABN not quoted	С	·%		Early stage ve limited partners	enture capital	т	•	
Frank	ked distributions	U	•%		Early st capital limited	tage venture	г		
	Franking credit	D	•		tax offset car	ried forward previous year	K	•	
	mounts withheld		•		Early st	age investor tax offset	J		
e	e of credit for TFN amounts withheld	•		]	Early stage	investor tax ried forward	ВЛ		
tron C	n payments from closely held trusts					previous year			
If you o	completed labels	5 T. I	K, J or M, attach the inform	matior	n requested in the	instructions.			
			· · ·						
56 Choice	o for resident	trus	tee to be assessed to	o cap	ital gains on be	ehalf of be	nefi	ciaries	
			ent calculation code	<u>, i</u>					
	of capital gains (	on w	hich the trustee has <b>Y</b>					<b>⊠</b> •∞	
lterre 57 er	nd 50 much h		encounted for all transfer						
			swered for all trusts - stion on page 1 of this t			any of these	e qu	estions, answer yes	
57 Benefi	ciarv under le	aal	disability who is pres	entlv	entitled to inc	ome from a	ano	ther trust	
Was any	/ beneficiary in th	nis tr	ust, who was under a lega	l disal					
	·		of the income of another tr nown, furnish the informati		quested in the inst	ructions.	Y	es No	
58 Non-re	sident trust		lf yes, state	the ar	mount of income				
ls the tru non-resi	ust a ident trust?	es		ary is p	ustralia to which presently entitled.	\$,_			<b>·</b> ∞

# **Declarations**

### **TAXPAYER'S DECLARATION**

#### Important

Before making this declaration check to ensure that all income has been disclosed and the tax return, all attached schedules and any additional documents are true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the ATO. The income tax law imposes heavy penalties for false or misleading statements in tax returns. **This declaration must be signed by a trustee or public officer**.

#### Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each beneficiary in our records. It is not an offence not to provide the TFNs. However, if the TFNs are not provided, it could increase the chance of delay or error in each beneficiary's assessment.

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** 

#### **DECLARATION:**

I declare that the information on this tax return, including any attached schedules and additional documentation is true and correct.

Signature	
Dat	te
Hours taken to prepare and complete this tax return	
TAX AGENT'S DECLARATION	
declare that this tax return has been prepared in accordance with information supplied by given me a declaration stating that the information provided to me is true and correct and me to lodge the tax return.	I that the taxpayer has authorised
Agent's signature	Client's reference
Dat	te / / / / / / / /
Contact name	
Agent's phone number (include area code) Agent's reference number	
	Office use only Indics X